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ABSTRACT

This final report is a process description of the methods used to establish an automated system for measuring the productivity of child protective services (CPS) staff in Texas's Region 10. It also describes the techniques used to train managerial staff in solving problems which might be identified when the system is operated at full capacity. Sections of the report focus on project background and origin, the management philosophy of Region 10, project goals and objectives, methods and procedures, a management training module for the new performance evaluation process, first-year and second-year progress in meeting objectives, the development of a checklist for use by supervisors to determine whether standards have been met, programing for the system, and explanations of the project to field staff. The report includes flow charts describing intake, in-home, and conservatorship services. Recommendations are offered which concern methods to enhance service delivery and the future statistical analysis of tracking system data. Appendices provide a Form 4040--Uniform Tasks and Standards performance evaluation form for a CPS specialist, 8 reading guides for program standards, 4 input documents, 12 output reports, and a brief description of the programing sequence. (RH)

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Innovations In Protective Services

P.L. 93-247 Grant Award #06C23/10

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FINAL REPORT:

**Automated Performance Tracking
and Productivity Improvement Project**

September 30, 1986

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**AUTOMATED PERFORMANCE TRACKING
AND PRODUCTIVITY IMPROVEMENT PROJECT**

Final Report

September 1, 1984, through August 31, 1986

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The views expressed herein are those of the authors and do not necessarily reflect the official position of the Office of Human Development Services of the U.S. Department of Health and Human Services.

September 30, 1986

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CONTENTS

General Introduction	iv
Acknowledgements	vii
Executive Summary	viii
Glossary	ix
1. Background and Origin	1
1.1 Regional Management Philosophy	1
1.2 Commitment of Regional Administration	2
1.3 Statewide Performance Standards	2
1.4 Opportunity for the Project	3
2. Project Goal and Objectives	3
3. Methods and Procedures	4
3.1 Committee Process	4
3.2 Statewide Advisory Committee	4
3.3 Regional Advisory Committee	4
4. Training Module	5
4.1 Managerial Training	5
4.2 Management Team Concept	6
4.3 Training of CPS Specialists	7
5. Progress Summary by Objectives	8
5.1 First-Year Progress	8
5.2 Second-Year Progress	9
6. Development of Reading Guides	11
6.1 Types of Guides	11
6.2 Format Features	11
6.3 Role of Committees	12
7. Flowchart Narrative Detail	12
7.1 Intake Flowchart	12
7.2 In-Home Flowchart	14
7.3 Conservatorship Flowchart	16

- 8. Programming 18
- 9. Explaining the Project 19
 - 9.1 Emphasizing Case Reading 19
 - 9.2 Assisting CPS Supervisors 20
- 10. Recommendations 20
 - 10.1 Service Delivery 20
 - 10.2 Statistical Analysis 21

Appendix

- A Form 4040--Uniform Tasks and Standards
- B Reading Guides for Program Standards
- C Input Documents and Output Reports
- D Programming Process

GENERAL INTRODUCTION

In the past year, the Texas Department of Human Services (DHS) conducted eight projects that present creative ideas to develop, strengthen, and carry out programs for prevention and treatment of child abuse and neglect. (Project titles and locations are shown in figure 1).

PROJECT GOALS

The goals of eight projects, funded by Part I of the Child Abuse Prevention and Treatment Act (Public Law 93-247, as ammended), are as follows:

- o developing innovative child abuse and neglect programs for volunteers and private agencies;
- o developing innovative child abuse and neglect programs for adolescents;
- o strengthening the quality of child abuse and neglect services through competency-based and specialized training programs and through automated performance tracking;
- o developing an Interagency Child Abuse Netword (ICAN) in conjunction with the criminal justice system; and
- o developing models and program designs for planning and delivering child abuse and neglect services and for allocating resources.

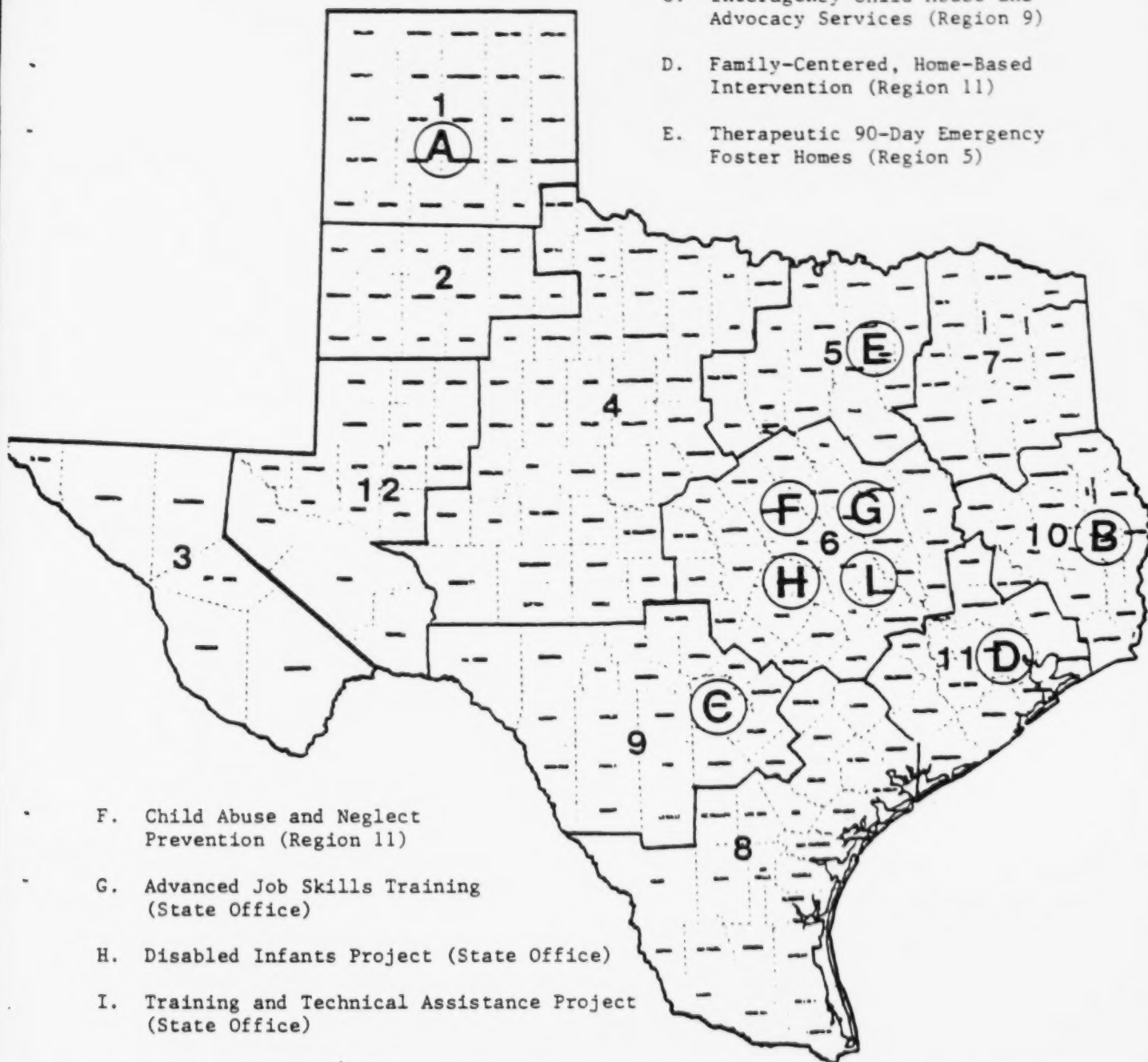
PROJECT NAME AND TYPE OF REPORT

This report is one in a series of eight separately packaged reports on the following demonstration projects, five of which are ending this year (final reports) and three of which will continue for another year (annual reports):

- o Child Abuse and Neglect Prevention (final report);
- o Advanced Job Skills Training (annual report);
- o Family-Centered, Home-Based Intervention for Protective Services Clients (final report);

LEGEND

- A. Life Skills for Adolescents (Region 1)
- B. Automated Performance and Productivity Improvement (Region 10)
- C. Interagency Child Abuse and Advocacy Services (Region 9)
- D. Family-Centered, Home-Based Intervention (Region 11)
- E. Therapeutic 90-Day Emergency Foster Homes (Region 5)



- F. Child Abuse and Neglect Prevention (Region 11)
- G. Advanced Job Skills Training (State Office)
- H. Disabled Infants Project (State Office)
- I. Training and Technical Assistance Project (State Office)

Figure 1. Location of projects by DHS region (or state office--located in DHS Region 6)

- o Automated Performance Tracking and Productivity Improvement (final report);
- o Life Skills for Adolescents (final report);
- o Therapeutic 90-Day Emergency Foster Homes (final report);
- o Interagency Child Abuse Network (annual report); and
- o Advocacy Services (annual report).

SELECTION AND ADMINISTRATION

Priorities from DHS's long-range plan provided the basis for selection of the eight projects to be demonstrated, and project results will be used in planning improvements in systems for delivering child protective services (CPS).

Six projects were managed by various DHS regions, and two were run by the Protective Services for Families and Children (PSFC) Branch at DHS headquarters in Austin.

Three of the projects--Interagency Child Abuse Network, Advocacy Services, and Family-Centered, Home-Based Intervention--were cooperative ventures between DHS and community-based organizations (for the first two projects, with the Alamo Area Council of Governments and the Bexar County District Attorney's Office of San Antonio; for the third project, with DePelchin Children's Center of Houston).

The Automated Performance Tracking and Productivity Improvement Project was conducted in DHS's Region 10, the Life Skills for Adolescents Project in Region 1, and the Therapeutic 90-Day Emergency Foster Homes Project in Region 5.

The projects entitled Child Abuse and Neglect Prevention and Advanced Job Skills Training operated out of the PSFC Branch at DHS headquarters in Austin.

FOR MORE INFORMATION

Each of the eight annual or final reports may be obtained by contacting--

Texas Department of Human Resources
Office of Strategic Management, Research, and Development
P.O. Box 2960--Mail Code 234-E
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The Texas Department of Human Services (DHS) wishes to acknowledge the work of those who helped develop the Automated Performance Tracking and Productivity Project.

Special acknowledgment goes to the Region 10 Child Welfare Board, Inc., under the leadership of Mrs. Nelda Oyes, chairwoman. The board supported automation of the project with funds from the T.L.L. Temple Foundation, Diboll, Texas.

The following project personnel contributed to the final report: Carey Garrison, who directed day-to-day operations; Grady Rhodes, who served as overall project manager; Barbara Ball, who served as systems operator; and Marilyn Kennerson, student intern, who assisted the project director.

Appreciation is accorded to John Cox and Morris Lang, programming consultants. John Anderson, systems analyst consultant, and Jerry Lackey, Ph.D., statistical consultant, contributed their technical expertise. Margaret Maxwell, retired regional director for Services to Families and Children in Region 10 and Mark Marsh, the current director, supported the project manager.

Child protective services supervisors and CPS specialists in Region 10 enthusiastically accepted the project goal and implemented the necessary procedures to make the project work. The Regional Management Information System Committee and its subcommittees assisted the project manager in implementing many of the project procedures.

At DHS headquarters in Austin, David Brock served as program liaison with the Protective Services for Families and Children (PSFC) Branch. The Personnel Division and the Office of Field Management sent representatives to serve on the project's advisory committee. The regional director of Services for Families and Children from DHS's Region 6 also served on the committee.

From the Office of Strategic Management, Research, and Development (SMRD)--headed by Associate Commissioner Murray A. Newman, Ph.D.--efforts were contributed by several members of SMRD's Special Projects Division, which is administered by Alicia Dimmick Essary. Lucretia Dennis-Small, project specialist, wrote the required federal quarterly and first annual reports and monitored project progress. Nicholas Constant edited project documents, and Phyllis Jamar produced them.

EXECUTIVE SUMMARY

Project Purpose. The Automated Performance Tracking and Productivity Improvement Project was designed by staff members in Region 10 of the Texas Department of Human Services (DHS). The project was developed to enhance the productivity and efficiency of child protective services (CPS) staff and to enable the region to better meet federal and state performance guidelines.

Report Contents. This final Report, a process description, describes the methods used to establish the automated system for measuring productivity and techniques used to train managerial staff in solving problems that might be identified when the system is fully operational.

Included in the report are flowcharts describing intake, in-home, and conservatorship services. The writers of the report also make recommendation about methods to enhance service delivery and about future statistical analysis of tracking system data.

System Implementation. The system has begun to serve as a mechanism to track individual and regional achievement of statewide performance standards and workload measures and to assist in identification of areas where corrective action is needed.

GLOSSARY

CAP--Corrective Action Plan; a plan of action indicated when staff performance is below expected levels

Conservatorship (CVS) case--(also referred to in some tracking system documentation as **substitute care** or **subcare**)--case in which DHS has legally assumed parental rights and responsibilities; often involves placement in foster (substitute) care; for three CVS reading guides, see Appendix B

CPS unit supervisor--child protective services first-line manager

CVS--see conservatorship case

Generic workload standards--(also referred to in some system documentation simply as **workload standards**)--the combination of number and type of cases that CPS specialists are expected to carry (plus any additional duties)

in-home case--(also referred to in some system documentation as an **ongoing case**--case in which the child remains in the family's home while the CPS specialist begins providing services to the child/family after investigation reveals abuse or neglect

intake/investigation case--CPS specialist's initial contact with child alleged to have been abused or neglected; for three case reading guides, see Appendix B

Minimum standards--in tracking system documentation, this term refers to program standards for conservatorship cases in which the child has been placed in substitute care

ongoing case--see in-home case

PD--program director, second-line manager

Program standards--specified procedures that CPS specialists are expected to perform on assigned cases

RA--regional administrator (manages one of 10 DHS administrative regions)

Reading guides--checklists used to determine whether program standards have been met

Regional office--headquarters for one of 10 DHS administrative regions

State office--DHS headquarters located in Austin, Texas

Substitute care (or subcare)--see conservatorship case

Uniform tasks and standards--Form 4040 (Performance and Development Plan and Evaluation) used to assess CPS specialist's job performance

1. BACKGROUND AND ORIGIN

The Automated Performance Tracking and Productivity Improvement Project was largely conceptualized in early 1984, when Region 10 administrative staff in child protective services (CPS) became aware of the availability of P.L. 93-247 grant funds that would finance special projects.

For several years before 1984, Region 10 had been developing and refining a Management Information System (MIS), which had begun very simply by attempting to provide worker and supervisory staff with automated tools to keep track of certain significant licensing standards. The MIS had virtually replaced the numerous tickler systems that had previously existed in local offices as reminders of the need to secure medical exams, dental exams, TB tests, and other key licensing requirements.

For the MIS manager, the regional director, and other CPS staff, it seemed that the development of a system to track and document worker performance and compliance with program standards was a logical extension of the existing MIS.

1.1 REGIONAL MANAGEMENT PHILOSOPHY

Since the implementation of the MIS, regional administrative staff had been developing a philosophy about managing service delivery. One basic premise was that improving services to clients should be the region's central focus.

Keeping this premise in mind, Region 10 administrators drew up a list of qualities that they wanted in an automated performance tracking system.

1. Aggregate data from caseloads would be available as needed if the client data are collected correctly.
2. Feedback to all levels of staff on their performance should be frequent, regular, and based on actual performance.
3. Performance expectations should be as high as possible but fair.
4. CPS specialists are professionals and should be treated as such by supervisors, both in expectations of performance and development of skills.
5. Supervisors are managers, not "super workers," and their time should be spent on administrative tasks rather than actual casework.

6. Performance evaluations should be based on actual performance of casework rather than on random range or subjective criteria.

Through a grant awarded to the Region 10 Child Welfare Board, the region had previously secured the necessary hardware to support the system. Technical expertise of DHS staff and consultants had previously been acquired as other parts of the MIS were brought in-house.

1.2 COMMITMENT OF REGIONAL ADMINISTRATION

Other key ingredients in the successful implementation of this project were the commitment of the regional administrator, the regional director (RD) for CPS, and both program directors (PDs) for CPS). The RD routinely went over the tracking system reports. He communicated directly with the PDs about what he saw in the reports. Both PDs were in constant and intensive communication with CPS supervisors to show that the region fully expected them to do the required reading of cases. Areas of resistance or inadequacy were addressed by all levels of management as they were identified.

This commitment to improving the quality and quantity of services delivered is essential to the success of a project of this type, which involves a restructuring of the supervisory role in every unit. Without complete commitment to improving service delivery, the project would have failed miserably because the normal reaction to a new approach is active and passive resistance.

1.3 STATEWIDE PERFORMANCE STANDARDS

At the same period of time, program standards from DHS's headquarters staff in Austin and directives from federal legislation (Public Law 96-272, Section 427 of the Adoption Assistance and Child Welfare Act of 1980) began to affect delivery of CPS throughout the state.

P.L. 93-247 encourages states to prevent the unnecessary removal of children from their homes and to reunify foster children with their families, by making state eligibility for Social Security Act Title IV-B and Title IV-E funds contingent upon the performance of specific services and legal protections for children and their families.

Performing the services called for by P.L. 93-247 requires a well-trained and highly skilled worker staff directed by supervisors who are keenly aware of each worker's capabilities and training needs.

Also during the same time period DHS's central Personnel Division developed a set of **uniform tasks and standards** for protective service workers--Form 4040 (see Appendix A).

1.4 OPPORTUNITY FOR THE PROJECT

With these developments as a base, Region 10 managers thought it was possible to strengthen the quality of services for child abuse and neglect through competency-based and specialized training programs. Another goal to be addressed was the development of a system for formulating caseload limits and proper caseload mix. Thus, efforts were directed toward establishing a consensus on the number and difficulty of cases a worker or unit could handle efficiently.

Project planners anticipated that electronic tracking of individual and regional performance would give CPS' administrative staff accurate and current data about staff productivity patterns. These data were expected to enable early implementation of corrective action measures and to give individuals and units concrete expectations about job performance.

With the awarding of the two-year P.L. 93-247 grant, the project staff was prepared to expand upon its theories and define a goal and objectives.

2. PROJECT GOAL AND OBJECTIVES

The project's planners had established their philosophical base and had articulated their desire for CPS managers and administrators to be able to establish empirical measures of adequate, inadequate, and exemplary performance. These desires were expressed in the project's goal--to develop a system that tracks individual and regional performance of uniform tasks and standards; to identify adequate and inadequate worker performance; and to help managers identify areas where either corrective action or formal recognition is called for.

This tripartite goal represented the thinking of the region's CPS administrators about the need to apply advanced data gathering and analysis methods to the issue of planning for higher productivity from program staff.

To achieve this goal, project planners set five first-year objectives:

1. to interface program standards (Appendix B) and work load standards with the uniform personnel tasks and standards (Appendix A);
2. to develop electronic tracking mechanisms for as many performance items as possible;

3. to develop and program computer-generated output reports on the quantity of performance at regional, unit, and worker levels;
4. to develop a model of adequate performance based on work load standards and caseload mix; and
5. to research and provide a training module that would teach managers how best to use the newly developed performance evaluation process.

3. METHODS AND PROCEDURES

3.1 COMMITTEE PROCESS

The successful completion of the Automated Performance Tracking and Productivity Improvement Project was the result of numerous factors. The availability of the technical resources was obviously important. Another significant factor was the use of two committees that helped direct the planning, reviewed progress, and provided necessary information for the project director.

3.2 STATEWIDE ADVISORY COMMITTEE

Because the project might have statewide implications for DHS personnel performance evaluation, and in order to ensure compliance with policy and law, a **statewide advisory committee** was formed, consisting of the region 10 and 6 RDs for Services to Families and Children; the Region 10 MIS manager; and--from DHS's state (central) office--representatives of the Personnel Division, the Office of Field Management, and the Protective Services for Families and Children (PSFC) Branch.

3.3 REGIONAL ADVISORY COMMITTEE

Within Region 10, a **regional advisory committee** was formed, containing at least one member from each CPS unit, a member of the contract management staff, and an administrator. The initial work of the regional committee was to introduce and become familiar with the concepts of productivity improvement and automated performance tracking. Later, the group worked on additional issues including management concepts, programming problems, implementation strategies, and overall project progress.

During the second year of the project the committee was reduced in size but still comprised the MIS manager, the project director, the supervisor for each CPS unit, and the region's two PDs for CPS. The committee's work in its second year consisted largely of planning for validation and implementation, and it was felt that a group of this size would be most productive in working through these issues. The regional committee also received information on technical issues from the programming and management consultants and the regional case analyst.

It is difficult to overemphasize how important the input of the committees was in the planning, development, implementation, and evaluation of this project. Since the members represented all levels of the CPS program, there appeared to be greater acceptance of the various phases of the project with the other members of the regional CPS phases of the project with the other members of the regional CPS staff. As a result, most caseworkers and supervisors cooperated fully and were enthusiastic about the benefits of the project.

4. TRAINING MODULE

Among the initial objectives of the project was to provide a training module for managers on use of the new performance evaluation process and subsequently to develop and pilot an individualized training module for caseworkers, based on specific needs as identified by performance inadequacies.

The managers participated in a series of training sessions, which began near the midpoint of the project's first year. This training was primarily directed at managerial style and the ability of the manager to perform as a facilitator, evaluator, and trainer. For many in the manager's group there was a need to rethink their entire perception of the role and goals of supervision. For others, training provided the first systemized effort to define and develop the responsibilities of the supervisor.

4.1 MANAGERIAL TRAINING

The project director and the MIS manager, with the approval of the RD, sought a training module that would meet the needs of the supervisory group and provide a common foundation for all. After considerable research a module was eventually purchased from a Texas-based human resources firm.

4.1.1 Training Content and Approach. This module included topics such as "Supervision Skills"; "Communication: the Key to Effectiveness"; "Supervisory Styles"; "Increasing Productivity"; and "Team-Based Problem Solving." Each topic in the module centered on methods that the supervisors could use to enhance their effec-

tiveness as leaders and as members of the regional supervisory team. The major elements of the training stressed self-awareness and effective problem solving through communication.

The training was presented over an eight-month period and combined lectures on topics related to supervision and productivity with role playing and behavioral assessments. The training atmosphere was deliberately relaxed, low key, and nonthreatening. The trainers coached the participants toward greater achievement and thereby served as role models for the participating supervisors to encourage their employees towards self-improvement and greater productivity.

4.1.2 Assessing Management Style. The most distinctive feature of the module and the training process was the use of an instrument that assessed the management style of each supervisor. Each participant not only completed a self-assessment of his or her own style but was also rated via the same instrument by subordinates, peers, and supervisor.

The collected data were entered into and analyzed by a computer to eventually show a pattern of behavioral skills for each supervisor. The behavioral scales were interpreted to the managers in work sessions during which each participant was given feedback on his or her managerial strengths and weaknesses. Recommendations for improving management styles were provided, and ways were suggested to achieve desired behavioral changes.

4.1.3 Setting Goals for Behavior Change. The responses to the four questionnaires were entered into a computer and plotted to show a pattern of behavioral skills on a 10-point scale. The behavioral scales were interpreted to the managers in work sessions where each participant was given feedback on his or her managerial strengths and weaknesses. Recommendations for improving management styles were provided, and ways to affect behavioral changes were suggested.

The average score of all participants was determined. Time was spent with the entire group to give actual techniques for improving management skills.

4.1.4 Positive Feedback on Managers' Training. There was a consensus among the participants that this training module was very useful: the training process helped participants see themselves as others saw them and gave them insights about their self-perceptions. All levels of staff reported that morale in Region 10's CPS program improved and that other program staff saw their input as useful and significant for perhaps the first time.

4.2 MANAGEMENT TEAM CONCEPT

Another significant factor about the training was its focus on all of the Region 10 management staff as a collective supervisory

group. This process stressed that the regional program should maintain a consistent approach to policy issues, expectations of staff, and methods of problem solving. While there was no sacrifice of individual differences in personality, this was the first time that management staff in the entire region viewed themselves as a single management team.

The entire process was very enlightening both to participants and observers. There were very notable changes between the group that started working together in January 1985 and the more cohesive group that emerged several months later. The participants reported improved morale in the region and noticeable changes in their interactions with each other and with subordinates. Subsequent follow-up assessments validated this perception of changes in interaction.

4.3 TRAINING OF CPS SPECIALISTS

After the various tracking components of the project were implemented and data for several months had been collected, an analysis revealed very few consistent inadequacies among CPS specialists. Staff appeared to consistently performing at or above acceptable activity levels. The few indicated noncompliances did not show a pattern that could indicate a need for specific training. These noncompliances could be fairly easily dealt with in the regular supervisory conference.

This perception of the data analysis seemed to be validated when service control readers from DHS's central office came to the region in April 1986, read a sample of randomly selected cases, and concluded that, in all performance standards, the region was performing at or close to the levels required by its Corrective Action Plan (CAP). In many categories all cases were found to be consistently above the CAP level. A preliminary analysis of the data by an industrial psychologist also validated this assumption. Training needs or skill deficiency at the specialist level appeared very seldom. It did appear that there were considerable variations among CPS supervisors in management style, in casework judgments, and (consequently) in the priorities they assigned to various job tasks.

Thus, the need for an individualized system of training has not emerged as a necessary element of this project. However, the administrative staff will continue to be alert to any need for an organized training approach for staff; and more sophisticated statistical analysis, which was beyond the scope of this project, will be performed in the future.

5. PROGRESS SUMMARY BY OBJECTIVES

5.1 FIRST-YEAR PROGRESS

5.1.1 Interface Standards. Among the initial tasks to be undertaken was the development of a document that concretely stated expectations about job performance by CPS specialists. The Protective Services for Families and Children (PSFC) Branch and previously established program standards and some generic work load standards. The CPS program director, aided by the project director and the state office Personnel Division, developed a set of uniform personnel tasks and standards (Form 4040, Appendix A), which took into account all the previously established (1) program standards, (2) generic work load standards, and (3) expectations and casework philosophy of the region.

The program directors then obtained comments and suggestions from CPS unit supervisors regarding the drafted standards. This process resulted in a final version of Form 4040 that included all of the previously noted performance standards as well as a set of quality rating scales, which the group determined were an essential part of the document and of the service delivery process. Form 4040 was finally reviewed and approved by the RD for Services to Families and Children, and it was then introduced throughout the region to worker staff. That revised version of the Form 4040 performance plan (Appendix A) is still in effect for all CPS specialist positions in the region. This product addressed the first objective, to interface program standards and work load standards with the uniform personnel tasks and standards.

5.1.2 Electronic Tracking Systems. For the second objective, to develop electronic tracking mechanisms for as many performance items as possible, the guiding principle was to keep the process as simple as possible. This meant not adding significantly to the existing data entry and data collection mechanisms. The resulting reading guides (Appendix B) were developed to relate closely to statewide program standards and minimum licensing standards for child placement facilities. As far as possible, the project director and the advisory groups decided to use those data elements for which there were existing collection mechanisms and to include the data elements used for statewide service control tracking. (The data entry and output process will be discussed in detail in section 7.) The result was a system that could provide compliance percentages for the region as a whole and for each individual CPS specialist.

5.1.3 Computer-Generated Reports. The development of computer-generated output reports, which identified performance compliance at all regional levels, very closely followed the development of the electronic tracking mechanisms (i.e., reading guides). In

many instances the development was simultaneous. The purposes of these computer-generated reports were to--

1. show which CPS specialist are or are not meeting performance standards and indicate when casework deficiencies are not the fault or responsibility of a specific specialist (compliance exception mechanism);
2. provide adequate documentation for work load planning by supervisors, program directors, and regional directors;
3. assist the identification of training needs for CPS specialists; and
4. accumulate documentation for determining individual and regional program performance.

5.1.4 Model of Adequate Performance. The project proposed to pilot test a formula for determining ideal caseload and caseload mixture. However, it became evident that a model or formula could not be developed until there had been a significant amount of time available for data collection and analysis. Therefore, a decision was made by the MIS manager, the project director, and the advisory group to defer this objective until the second year of the project.

5.1.5 Managers' Training. The last first-year objective was to research and provide a training module that would teach managers how best to use the newly developed performance evaluation process. It was recognized early in the process that the changes and the new philosophy to be used in this evaluation process would best be facilitated if the managers had training in how to approach their employees in a manner than would assist in achieving higher productivity. Previously, there were numerous management styles in place--some with a sound theoretical base and some without.

5.2 SECOND-YEAR PROGRESS

The project's goal for its second year was to put the tracking system into operation, to track individual and regional performance, to identify adequate and inadequate performance, and to identify performance needs that indicated a need for corrective action.

This broad goal was to be accomplished by completing the following second-year objectives:

1. to implement data collection and output reports regionwide;
2. to analyze data on a regular basis;

3. to pilot an individualized training module for caseworkers, based on specific needs as identified by performance inadequacies; and
4. to develop automated performance tracking for two specialized programs (foster homes and adoption).

5.2.1 Data Collection and Output Reports. The data collection phase began on schedule. (The MIS manager and project director provided supervisors with instructions on the use of the data collection instruments.) Beginning October 7, 1985, there were regular meetings of the Region 10 CPS supervisory group to discuss all aspects of the process. These meetings were led by the PDs and the MIS manager. Problems and concerns were identified and eventually divided into two general categories: practical and philosophical considerations. The meeting process continued until all the concerns were satisfactorily addressed. The meetings also served as a validation mechanism for the project in that standards interpretation and quality ratings for casework could be presented and a consensus could be reached.

After a start-up period of data collection, the **output reports** could be put into place. In this area, too, face-to-face communication facilitated the project. Discussions with unit supervisors about actual data on their workers were the primary vehicle for explaining and demonstrating the uses of the tracking system. This type of training is extremely powerful and has a more lasting effect than other methods. Personnel who were working directly with the project began a process of "circuit riding" to each unit in the region. At this phase it was very helpful to meet with the worker staff to explain and discuss the project and its connection with their work performance. This process also was helpful in answering questions, identifying new issues, and correcting misconceptions about the project among CPS specialists.

5.2.2 Analyze Data. After a sufficient amount of data was collected and output reports began to be generated, preliminary analysis began, and performance trends could be identified. Analysis of data will continue as a regular part of Region 10's program.

5.2.3 Pilot Test Caseworker Training. Likewise, the development of an individualized training module is to be a continuously developing part of the CPS program even after the grant phase concludes. A very high percentage of CPS specialist staff in the region were in compliance with work expectations and standards. However, preliminary discussions have continued with the regional CPS staff development trainer and a consultant affiliated with Stephen F. Austin University in Nacogdoches regarding the issues to be addressed in and the contents of a training model.

5.2.4 Tracking for Foster Care and Adoption. The project's fourth objective for its second year is an ongoing task. The specific

needs of the foster homes and adoption staff members for tracking information were relatively limited. Information has been collected from the two sets of staff. Through the committee process, work will continue to develop performance tracking systems for these workers.

6. DEVELOPMENT OF READING GUIDES

The development of the reading guides (checklists used to determine whether standards have been met) was one of the most important parts of the tracking system. Several decisions were made about reading guides when the project was conceived.

6.1 TYPES OF GUIDES

It was necessary that the reading guides be case-specific in order to spare the supervisor from having to read with a generic guide. Appendix B shows the seven reading guides developed for specific case types and subtypes.

6.2 FORMAT FEATURES

It was also desirable to have one-page reading guides, and this proved possible on intake investigation and in-home cases. Conservatorship reading guides had to be longer due to the large number of standards involved in these case types (see Appendix A).

It was also decided to follow the state office format for service control case reading as closely as possible since supervisors were familiar with it. This approach was relatively easy to take once cases were broken down by specific type.

To avoid any duplication of effort and to achieve complete streamlining of the case reading process, the region adopted common narrative formats for all standards. At the present time these formats are in place; they make case reading with a reading guide much simpler and quicker than with an unstructured method of documentation. This streamlining effort has been continuing for several years.

Another thing that was closely monitored was policy interpretation being delivered by the Protective Services for Children (PSFC) Branch. The project director was in close contact with PSFC personnel regarding standards and standards interpretations. All reading guides were reviewed by PSFC before implementation.

6.3 DEVELOPMENT ROLE OF COMMITTEES

In the development of each individual reading guide, project staff took advantage of regional personnel expertise through subcommittees and the regional MIS committee. The conservatorship case reading guide was developed by a subcommittee headed by the substitute care supervisor in Beaumont. His committee developed the reading guide for all program standards on conservatorship cases. The intake reading guide subcommittee was headed by the intake supervisor in Beaumont and a generic supervisor from the rural northern end of the region. The regional MIS committee reviewed all reading guide formats and standards prior to implementation as well.

The generation of reading guides is handled automatically by the computer. Generation is primarily based on critical dates within the casework process. For example, cases must be read every three months. The computer counts days and reminds supervisors when reading is due. (This process is described for all the reading guides in section 7, "Flowchart Narrative Detail.")

7. FLOWCHART NARRATIVE DETAIL

7.1 INTAKE FLOWCHART

The intake process (charted in figure 1) begins when a **complaint is received** in the local offices by either a CPS specialist or, as in the urban offices in Jefferson County (Beaumont and Port Arthur), by an intake community service aide. The complaint is **registered on an intake log**.

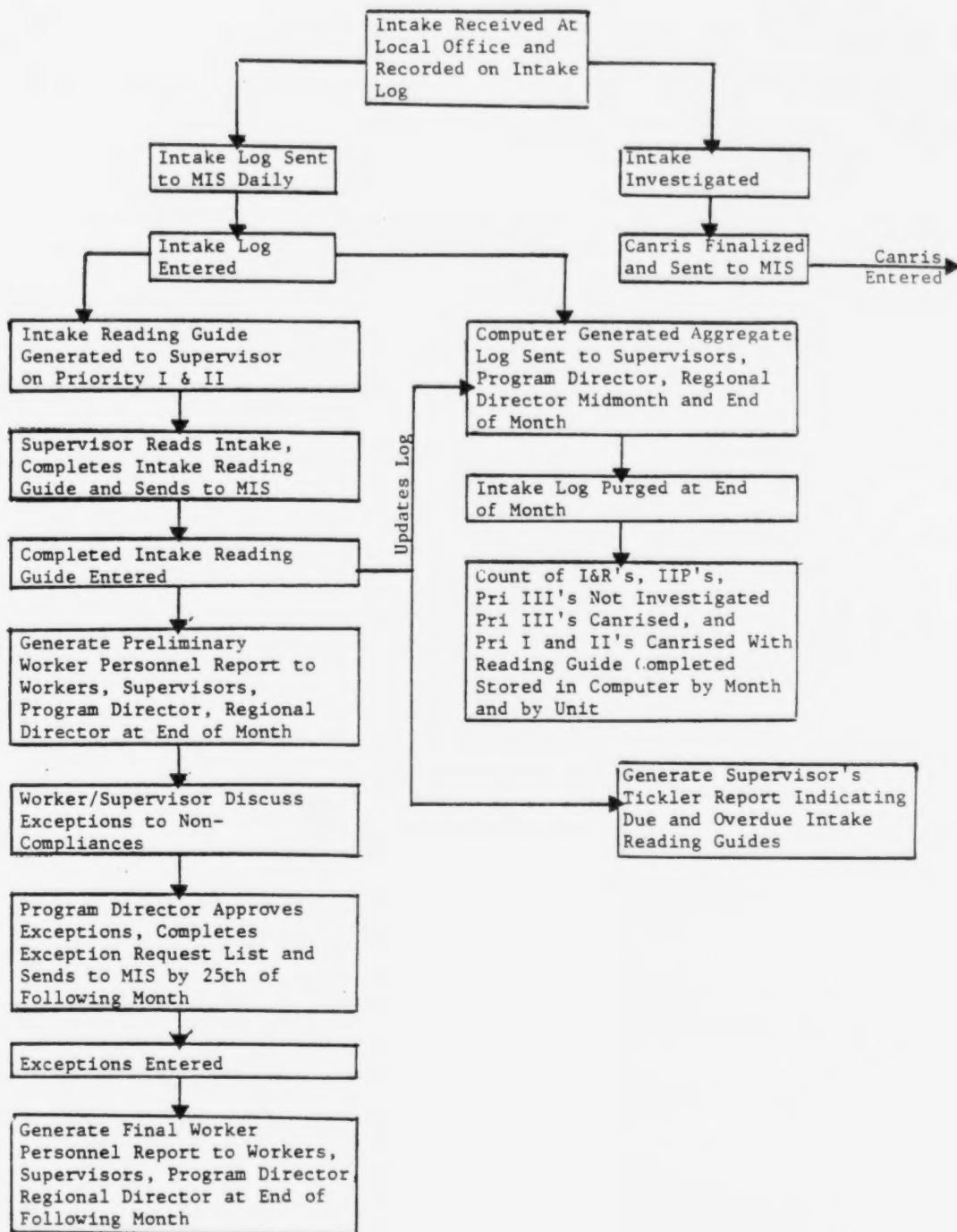
The log is sent to the Management Information System (MIS) daily for entry into the computer.

After the **intake log is entered** into the system, it generates the appropriate **intake reading guide**, which will be either a Priority I; Priority II, sexual abuse; or Priority II, not sexual abuse. This reading guide is case-specific, and the content is determined by the specific standards involved in each type of case.

Following investigation and dictation of the investigation by the specialist, the **supervisor reads the case**, completes the intake reading guide, and sends it back to the MIS.

The intake reading guide is **entered** into the computer, and the aggregate data from the reading guides generate the **preliminary report** (Appendix C), which is sent to CPS specialists, supervisors, PDs, and the RD at the end of the month. The preliminary report contains only the data appropriate at that time and does not account for exceptions (noncompliances that are beyond the specialist's control).

FIGURE 1. INTAKE FLOWCHART



Following the generation of the preliminary report, the specialist and supervisor discuss cases that were out of compliance and whether they feel that the noncompliance was due to circumstances beyond the specialist's control. There are several reasons why a specialist would be out of compliance and have a no-fault decision made. There are excessively time-consuming cases; caseload mix problems (intake overload, in-home overload, substitute care overload; unit vacancies; illnesses; authorized leave; unusual court requirements; data error; and others.

After negotiation between the specialist and supervisor is completed, the supervisor sends the report to the PD, asking him or her for approval of the exceptions requested. The PD determines noncompliance and/or approved exceptions, completes his (or her) part of the preliminary report, and sends it to the MIS for entry.

After entry, the final report (Appendix C) is generated, which will show exactly what percentage of the unit's intakes the specialist has handled and how many were in compliance with standards. It also details those that were not in compliance due to problems that the specialist is not responsible for.

In addition to the preliminary and final reports on CPS specialists' performance, the intake reading guide generates an aggregate log, which goes to supervisors, program directors, and RD at the middle and the end of the month to assist them in determining the intake load for their geographical areas.

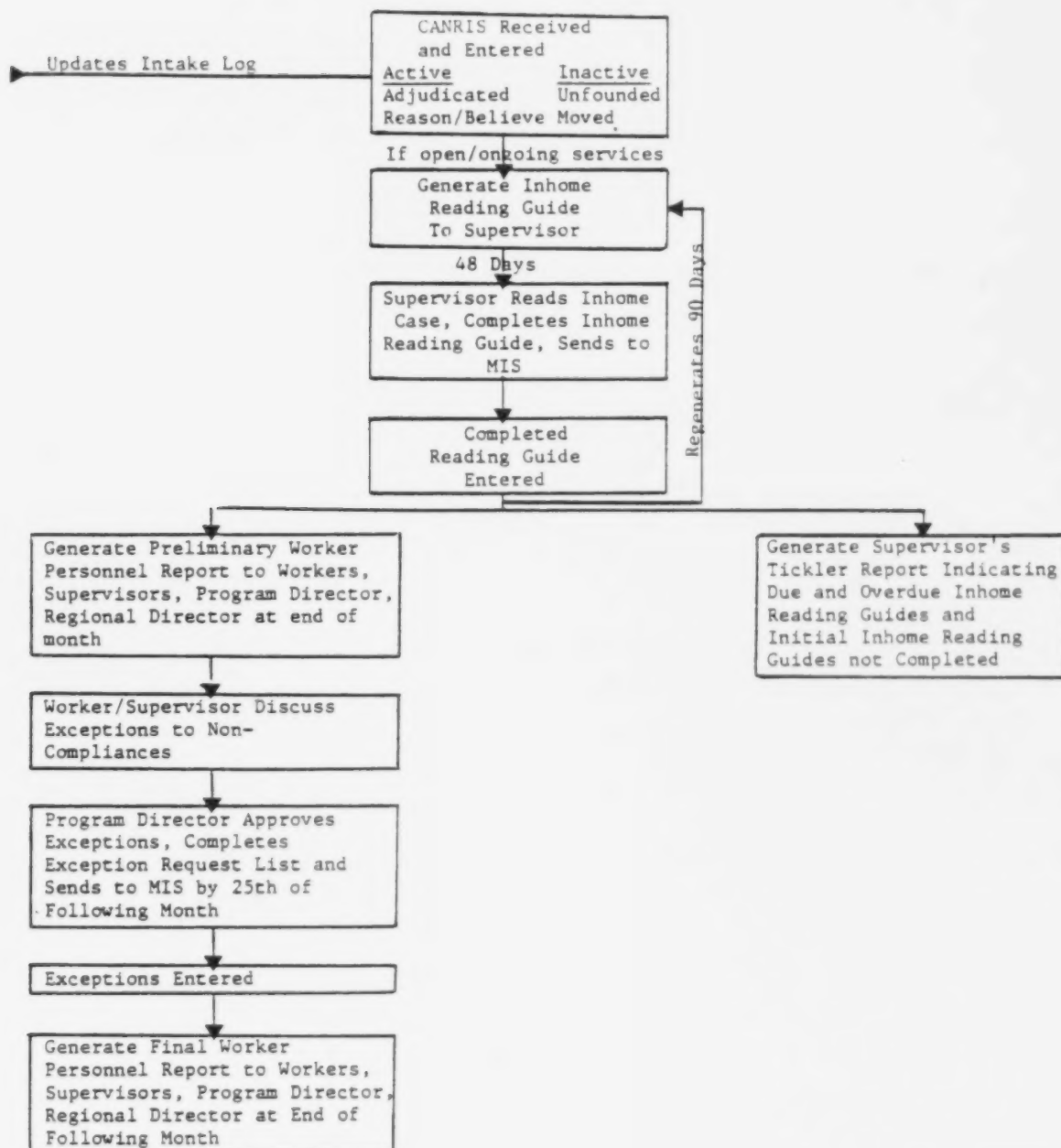
The intake log (Appendix C), also tracks I&Rs (Information and Referral) and Priority III complaints that are not investigated (this is helpful information as it figures into work load and is often requested by administrative staff when looking at staffing issues).

The Intake Log also generates the supervisor's tickler report (Appendix C), indicating which intake cases are due to be read in any given month. There is a 30-day time lapse between the date the worker receives the intake and when it is due to the supervisor. The supervisor then has two weeks to read the case and submit the reading guide to the MIS. This amounts to 45 days lag time between the date a complaint comes in and the date the data are received at the MIS site. This 45-day period is necessary to allow a reasonable amount of time for the casework to be done and the paperwork and case reading to come about. The lapse does present a minor problem, but the standards and the reality of the CPS specialist's and supervisor's situation make it necessary to allow this much time on individual complaints.

7.2 IN-HOME FLOWCHART

When a case is validated and becomes an in-home services case (see figure 2), the CANRIS form (the data entry form that registers cases onto the central Child Abuse and Neglect Report and Inquiry

FIGURE 2. IN-HOME FLOWCHART



System) triggers the in-home services subsystem, which generates an **in-home services reading guide** and sends it to a supervisor.

The supervisor then has 48 days to **complete the reading guide** and sent it to the MIS.

When entry of the reading guide is accomplished, the computer generates the in-home services portion of the CPS specialist's **preliminary report**.

The same guidelines apply for in-home services cases as for intake: **compliance exceptions are granted or denied** and the **final report** is generated, which details cases that are in and out of compliance.

Also generated automatically by the computer is the in-home services portion of the **supervisor's case reading tickler**, which shows the dates that cases are due to be read as well as overdue in-home services cases. After 90 days, the computer automatically generates a second reading guide if the case is still open. Cases must be read every 90 days to be in compliance with the supervisor's reading standards.

7.3 CONSERVATORSHIP FLOWCHART

The conservatorship subsystem (charted in figure 3) is initiated when Form 2001-A (a data entry form that certifies that a child has entered substitute care) clears the MIS, indicating that a **child has been removed from home by court order**.

Form 2001-A is entered into the system, which generates a **"subcare" reading guide** to the supervisor. The supervisor has 33 days to read the case, complete the subcare reading guide, and sent it to the MIS.

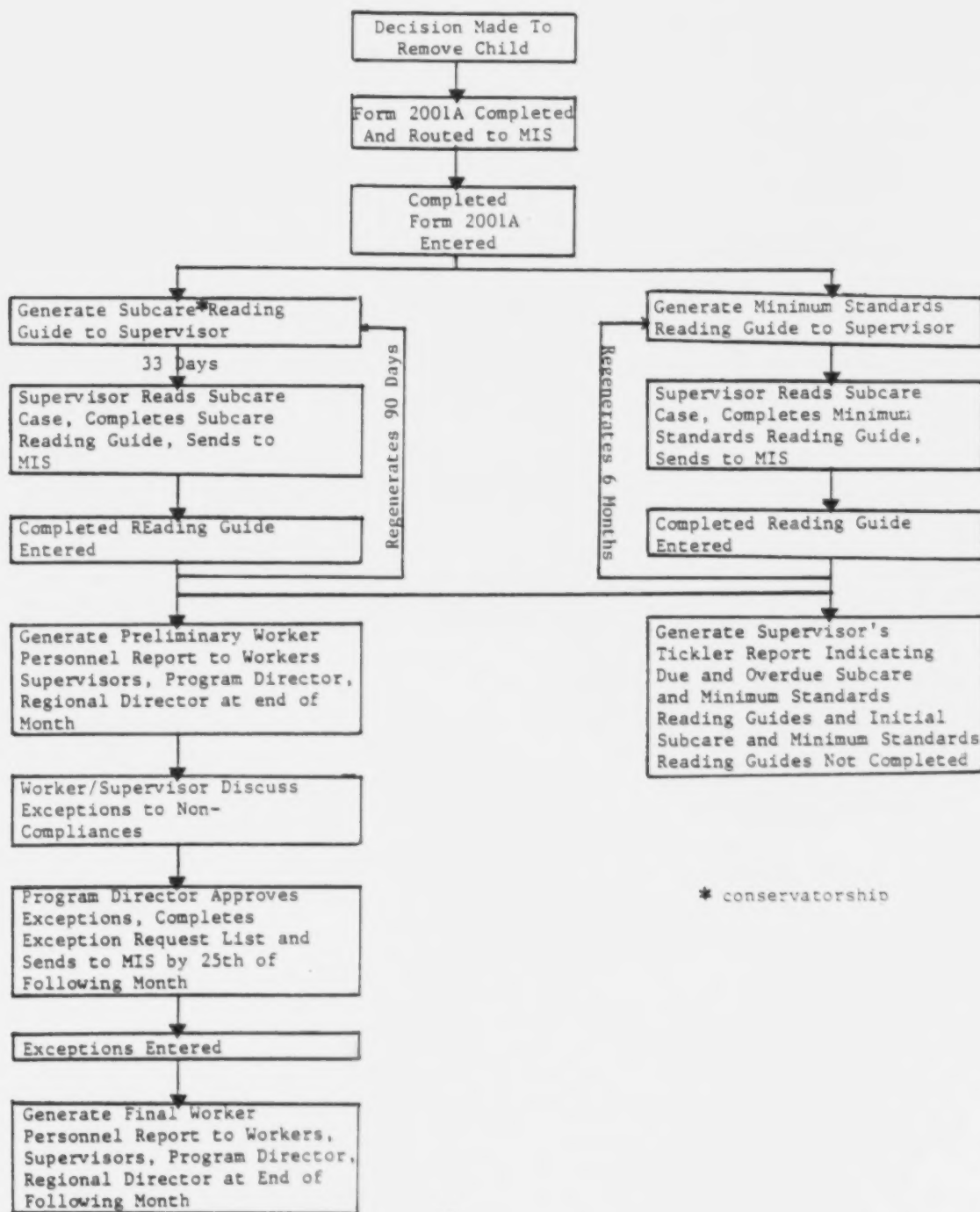
The same general procedures are followed for the **preliminary and final performance reports** as in the intake and in-home subsystems.

For regional purposes, aggregate data are maintained on noncompliance. In this aggregation, exceptions are not credited, yielding an actual compliance percentage.

At the same time as the substitute care reading guide, the computer also generates a **minimum standards reading guide**. The Minimum Standards for Child Placement Agencies (Chapter 42, Human Resources Code) are read at the same time the substitute care program standards are read. The only difference is that the regeneration time on the computer is six months rather than three months as in conservatorship standards. Again this procedure reflects statewide reading standards for supervisors, which require that cases must be read quarterly for program stanards.

From the conservatorship and minumum standards reading guides, the computer generates the **supervisor tickler report**, which

FIGURE 3. CONSERVATORSHIP FLOWCHART



includes dates that cases are due to be read and cases that are overdue for reading.

8. PROGRAMMING

Programming for the system was accomplished by a consultant who has been involved with the MIS for over five years. The specifications for all programs were developed in-house. The programmer communicated primarily with the system operator, who has been working with him for several years on other projects in Region 10.

It was determined that the system should be written in COBOL, to make it consistent with the rest of MIS. Use of this language would make for easier maintenance and enhancement of the programs.

One aspect of the programming that presents a problem is the need to maintain two years of historical data. This is necessary in order to allow output runs for calendar-year-to-date or fiscal-year-to-date. Historical file maintenance and significant disc space is required.

Another aspect of the programming determined to be necessary was to have variable date runs. Programming allows for the entry of specific dates to be included in a report (one month, quarterly, six month, etc.) The computer then determines compliance percentages based on the dates given.

Major milestones in developing the system included the following:

1. intake logs begin being entered into the MIS computer on 7-1-85;
2. intake reading guides generated for the first time 7-15-85;
3. computer-generated intake log operational on 8-6-85;
4. ongoing reading guides generated on 8-20-85;
5. conservatorship reading guides generated and distributed 1-86;
6. worker's preliminary performance report generated 1-86;
7. first run of minimum standards reading guides 3-86;
8. worker's final performance report generated 5-86;
9. supervisor's case reading tickler report generated 7-16-86;

10. quarterly aggregate compliance reports generated 7-86; and
11. work load formula report completed 8-86.

Further details on the process of programming can be found in Appendix D.

9. EXPLAINING THE PROJECT TO FIELD STAFF

Explanation of the project followed the same time sequence as the programming, i.e., intake/investigation logs and reading guides were generated first, then in-home services, and finally the conservatorship system.

The region's approach to implementation involved continuous contact between the project director, MIS staff, and the supervisors and CPS specialists in the region. The project director and her assistant met with all of the units to explain the project.

9.1 EMPHASIZING CASE READING

In addition to attending unit meetings, the project director and her assistant met with the individual supervisors to go over the details of this system as well as the administrative philosophy behind implementing such a process-oriented computer system. There did not appear to be active resistance to the philosophy; however, restructuring the supervisory role toward a more management-oriented approach did present some problems during the implementation stage.

The main problem that supervisors encountered was finding the necessary time to do the required case reading. (It should be noted that case reading requirements were not changed for the project. The reading requirements are set by state office policy, and one of this project's goals was to ensure that this policy was adhered to in all cases.) Region 10 management believe that it is a necessary job task of supervisors to frequently read and monitor cases for compliance with standards as well as for quality of service. In reality, however, many supervisors were not reading their cases as required by policy. With the tools and reports generated from the tracking system to help the supervisors plan case reading activity, administrative staff believe that it is possible for supervisors to read their cases every three months if they have good organization skills.

9.2 ASSISTING CPS SUPERVISORS

The entire case reading process was streamlined in order to help the supervisors accomplish this task. On intake/investigation cases, a regionally developed standard format for documentation has been in place for two years. If CPS specialists follow this format during investigation and documentation of casework, they will be in compliance with all state law, federal mandates, and DHS casework policies. Standard formats also exist for conservatorship cases and in-home services cases. CPS supervisors received direction from the project director, from his assistant, and from the MIS manager on how to read cases by these formats, which greatly speeds up the case reading process.

Some supervisors resisted this more objective-oriented management style. In spite of the project's training, which stressed organizational and communication skills, several supervisors had problems complying with the new approach. For this reason it was decided to add a second regional case analyst to assist supervisors in their case reading responsibilities. These case analysts would not rate the quality of casework but would read the case only for compliance with standards.

Once the additional case reader was added, it was possible for the supervisors to read all of their cases quarterly with minor exceptions. The reality of a supervisor's life is such that during peak court times, peak intake times, or when staff vacancies exist, a supervisor cannot do the required reading. With the help of the case analyst, however, the program directors can offer assistance to the supervisors during these times of overload.

10. RECOMMENDATIONS

Project findings led to recommendations about the service delivery system as well as future statistical analysis of data that the tracking system gathers.

10.1 SERVICE DELIVERY

The following recommendations apply to service delivery:

1. Case reading by CPS supervisors should be changed from every three months to every four months. This change would sacrifice little and would be a big help to supervisors. By having a more realistic standard, supervisors would come closer to meeting their case reading mandate.

2. Supervisors should receive ongoing training on the casework implications and client impact of the performance standards, since the preliminary data analysis seemed to indicate that supervisory emphasis rather than specialist skill deficiency was the cause of most non-compliance trends.
3. High expectations of specialist compliance should be maintained, since the majority of cases meet or exceed state office CAP levels in compliance percentages.
4. When the casework quality rating falls on full category below the regional aggregate on any specific case type, a training need probably exists for the specialist. Administrative attention should be focused on the specialist whether it be for training or other intervention. When the quality is one full category above the aggregate, administrators should give the specialist formal praise.

10.2 STATISTICAL ANALYSIS

The following recommendations relate to future statistical analysis that was beyond the scope of this project.

1. Solicit assistance from the PSFC Branch and the Office of Strategic Management, Research, and Development to set up statistical runs on DHS's mainframe computer to analyze the data appropriately.
2. Run statistical analyses on all logical pairings of time and quality of service.
3. Run statistics to see whether significant differences exist between overtime and quality of service.
4. Run statistics to compare time, quality, and compliance percentages on all types of cases by worker, unit, and region to determine strengths and weaknesses for training purposes.
5. Check overtime on the workload measures report against actual overtime reported to the supervisor, and correlate against quality rating to test state office work load formula.
6. Test average quality rating given by supervisors on all case types to ensure consistency in rating.

APPENDIX A

Form 4040--Uniform Tasks and Standards

Texas Department
of Human Resources

PERFORMANCE AND DEVELOPMENT PLAN AND EVALUATION

Form 4040
June 1982

Employee Name		Soc. Sec. No.		BJN		Mail Code	
Merit System Title		Functional Title (if different)				Hire Date	
Date Assigned Rater	Date Assigned Position	Date of Perf. Plan	Date Evaluation Due	Period Covered by Eval. From to			

REASON FOR EVALUATION: ☐ Initial Probation ☐ Annual ☐ Transfer ☐ Conference(optional)
☐ Other(specify):

Brief Job Description:

Child Protective Services Specialists

RELATIVE IMPORTANCE	PERFORMANCE PLAN--List Task Statements, Followed by Performance Standard(s)	ACTUAL ACHIEVEMENTS	Exceeds Requirements	Meets Requirements	Does Not Meet Requirements
A.	Assesses current life situations of child(ren) and family to determine the presence of child abuse and/or neglect. 1. Investigations and assessments are conducted according to regional and State policy, standards, and guidelines. 2. Obtain accurate assessments which protect children while maintaining intact families, as appropriate. a. Responds to referrals within appropriate time frames based on priority. Immediate response is required for Priority I, endangering situations (no exceptions) per year on Priority II referrals. b. Form 2202-A completed on all referrals and submitted to data processing within 30 days of intake. Exceptions must be approved by the supervisor. 2-4 non approved exceptions allowed per year. c. Form 2230 submitted to appropriate law enforcement agency as required. No exceptions for Priority I and II complaints. d. Assessments will reflect the minimum standards for quality. 3. Obtain assessments which result in sufficient information when court action needed. a. Provide narrative, reports, etc. as requested by D.A. on or before stated due date. No exceptions allowed. Review hearings and disposition hearing				

RELATIVE IMPORTANCE	PERFORMANCE PLAN—List Task Statements, Followed by Performance Standard(s)	ACTUAL ACHIEVEMENTS	Exceeds Requirements	Meets Requirements	Does Not Meet Requirements
	scheduled as required standards. b. Testimony presented in a professional manner as judged by supervisor and/or District Attorney. c. Situations of children are accurately evaluated for degree of life threatening or safety endangering conditions, initially and on an ongoing basis. d. Investigations visits are conducted at a time and in locations appropriate for the individual case situation. e. Assessments will reflect the minimum standards for quality defined for the unit by the supervisor. B. Uses interviewing techniques to obtain information needed for serving client needs. 1. Methods of obtaining information are within policy and guidelines reflecting appropriate adaptation to the individual situation. 2. Sufficient information is obtained to make timely decisions and case plans. Obtains relevant social history information with 1-2 exceptions allowed per year. 3. Efforts are made to obtain information from collateral contacts. 4. Sufficient information is obtained to facilitate court proceedings. 5. Interviewing techniques will reflect the minimum standards for quality defined for the unit by the supervisor. 6. Parent and child's rights are maintained. C. Places and provides care to children in substitute care. 1. Child placement activities are carried out according to policy requirements and standards. a. Case movement forms are completed within 24 hours of initial and subsequent placement with 1-3 exceptions allowed per year. b. All forms (220, 213 series, etc.) and intake study completed, and an Administrative Case Review is scheduled within 30 days of placement and every 6 months thereafter. c. Administrative Case Review Forms are of acceptable quality based on supervisor's professional judgment and are prepared prior to the Initial Case Review Staffing. d. Dispositional hearings will be scheduled within 18 months and every six months thereafter. 2. Child placement activity is based on sound child placement theory and practice and incorporates permanency planning principles. 3. Plans for initial placement are made in conjunction with appropriate others, and services are achieved in a timely fashion.				

RELATIVE IMPORTANCE	PERFORMANCE PLAN—List Task Statements, followed by Performance Standard(s)	ACTUAL ACHIEVEMENTS	Exceeds Requirements	Meets Requirements	Does Not Meet Requirements
	4. Initial and subsequent placements are made with prior approval of supervisor and program director. 5. Monthly contact is maintained with foster children unless otherwise stated and approved in the Plan of Service. 1-2 exceptions per year. 6. Foster care eligibility review forms are submitted every six months (no exceptions), and any changes in the child's income is reported within 3 working days. (F2200) 7. Worker assures that child support is requested from the court on all children placed into substitute care. D. Provides child protective services after normal working hours to maintain 24 hour coverage. 1. Worker is readily available during assigned off-duty hours. (no exceptions) 2. Assessment and handling of emergency situations are performed according to the requirement of policy and local procedures with no exceptions. 3. Immediate response is required for Priority I, life endangering situations with no exceptions. E. Develops and /or implements case plans to meet the specific needs of the individual family members. 1. Information required by policy, standards, and guidelines is obtained, recorded, and updated reflecting individualized assessments of the clients' problems and needs of the situation which fit Agency objectives (95-100% compliance) a. Plans completed within 45 (30 days for sub care) working days of case opened. b. Plans are updated at least every six months or when significant changes occur. (95-100% compliance.) c. Problems/needs are accurately assessed and plans are developed jointly with the client identifying solutions/goals. (95-100% compliance). 2. Contacts are made according to policy and program requirements and the focus remains on achieving service goals. a. Initial contact is made with the family within 10 working days of case assignment. 2-4 exceptions allowed per year. b. Contact is made monthly or as outlined in the service plan. (95-100% compliance) c. Narrative reflects good casework practice. 3. Available community volunteer and contracted resources are used according to the need of the individual case situation and policy. 4. When applicable, placement decisions and actions consider the individual circumstances,				

RELATIVE IMPORTANCE	PERFORMANCE PLAN—List Task Statements, Followed by Performance Standards	ACTUAL ACHIEVEMENTS	Exceeds Requirements	Meets Requirements	Does Not Meet Requirements
	the available resources, and reflect good casework practice. 5. Administrative Reviews will be scheduled every six months as per local guidelines for all conservatorship children not in their own home. (no exceptions) F. Maintains sufficient case documentation, including forms and narrative, to provide a complete and accurate written record. 1. Required forms, as outlined in State and Regional policy are completed on a timely basis, appropriately submitted, updated as needed, and are present in the case folder. a. SSMS completed on every family member within 45 days of case assignment. (95-100% compliance) b. Forms for contract referrals & MIS are completed in a timely manner with a minimum of error & are updated as needed (95-100% compliance) 2. Narratives are completed, accurate, and current according to appropriate policy requirements. a. Completed narrative will be completed within 30-45 days of contact and submitted to the MIS. (95-100% compliance) b. Narrative will reflect and accurate representation of family situation and the services being provided as per good casework practice. G. Builds and maintains communications and working relationships with clients, community, and co-workers resulting in agency objectives being accomplished. 1. Effective relationships are built and maintained with client reflecting objectivity concerning differences in cultures and values as per good casework practice. 2. Effective relationships are built and maintained with community resources. 3. Relationships with TDHR personnel are conducive to the provision of service and the accomplishing of agency objectives. 4. More than 1-2 valid complaints per year does not meet requirements. The seriousness of a single complaints may result in the worker not meeting requirements. 5. The quality of relationships will reflect the minimum expectations set for the unit by the supervisor.				

RELATIVE IMPORTANCE	PERFORMANCE PLAN—List Task Statements, Followed by Performance Standard(s)	ACTUAL ACHIEVEMENTS	Exceeds Requirements	Meets Requirements	Does Not Meet Requirements
H.	Uses supervision to obtain and facilitate service to clients. 1. Seeks supervisor's assistance or approval when appropriate as defined the supervisor or as required by policy. (1-2 exceptions per year). 2. Supervisor is informed of current case situations in a timely manner as per expectations set for the unit by the supervisor. (1-2 exceptions per year) 3. The seriousness of the situation about which a supervisor is not notified may result in the worker not meeting requirements.				
I.	Completes special tasks, projects, or assignments upon request of the supervisor. 1. Assignments are completed within time frames negotiated by worker and supervisor. (1-2 exceptions per year) 2. Quality of completed assignments is acceptable according to the supervisor's expectations.				
J.	Develops and maintains suitable work plans. 1. Sets priorities to manage workload effectively in completing required tasks within time frames. (1-2 exceptions per year) 2. Non-case related functions are completed within required time frames (1-2 exceptions per year) 3. Quality of work plans will reflect the minimum standards set for the unit by the supervisor. The seriousness of a single complaints, error, or omission in any of the job tasks may result in the worker not meeting requirements depending on its effect on the client, community or agency.				

APPENDIX B

Reading Guides for Standards

The following reading guides are used by region 10 Child Placement Supervisors and Case Analysts in reviewing applicable cases. Each reading guide reflects the program standards and/or minimum standards read.

1. Intake Reading Guide, Priority I B-1
2. Intake Reading Guide, Priority II, Sexual Abuse B-2
3. Intake Reading Guide, Priority II, Non Sexual Abuse B-3
4. Ongoing and Non-CVS Subcare Reading Guide B-4
5. CVS Reading Guide for Cases Opened
Less Than 7 Months B-5
6. CVS Reading Guide for Cases Opened 7 Months or More B-6
7. CVS Minimum Standards Reading Guide B-8
8. Supervisor's Qualitative Rating Scale B-15

Intake Reading Guide (1)
C82308201
Date of Referral: 05-13-86

Appendix B-1
Worker KATHY LONDON
Supervisor MICHAEL SPELL

Please check if all standards were answered Y or NA ☐

I.A. Priority I Reports

- | | | | |
|--|------------------------------|-----------------------------|------------------------------|
| 1. Did the worker, within 24 hours of the referral, attempt to inform the supervisor of the report and obtain the supervisor's approval of the action to be taken/that had been taken? | Yes ☐ | No ☐ | |
| 2. Did the worker level or above staff begin protective services for the child within 24 hours of the referral? | Yes ☐ | No ☐ | |
| 3. For Priority I reports other than those made by law enforcement: Did the worker orally notify law enforcement within 24 hours of the report and send a written report within 5 calendar days? | Yes ☐ | No ☐ | N/A ☐ |

II. The Investigation

Did the worker determine:

- | | | | |
|---|------------------------------|-----------------------------|------------------------------|
| A. The nature, extent, and cause of the abuse/neglect? | Yes ☐ | No ☐ | |
| B. The identity of the person apparently responsible? | Yes ☐ | No ☐ | |
| C. The names, ages, and conditions of the other children in the home? | Yes ☐ | No ☐ | N/A ☐ |
| D. The caretaker's ability to protect the child? | Yes ☐ | No ☐ | |
| E. The adequacy of the home environment? | Yes ☐ | No ☐ | |
| F. The relationship of the child to the caretakers? | Yes ☐ | No ☐ | |
| G. If any action by DHR is needed to protect the child? | Yes ☐ | No ☐ | |

- | | | |
|--|------------------------------|-----------------------------|
| III. Did the supervisor approve the worker's actions and findings at the completion of the intake process? | Yes ☐ | No ☐ |
|--|------------------------------|-----------------------------|

IV. Results explained to:

- | | | | |
|----------------------------------|------------------------------|-----------------------------|------------------------------|
| A. The parents/caretakers | Yes ☐ | No ☐ | |
| B. Children who were interviewed | Yes ☐ | No ☐ | N/A ☐ |
| C. The identified complainant | Yes ☐ | No ☐ | N/A ☐ |

☐ Rate the overall quality of the casework on this case using the quality rating scale. A rating of 1 or 5 requires written justification below:

Supervisor's Signature

Date Reviewed

Please submit to MIS
within 3 days of review.

Intake Reading Guide (2A)
 [REDACTED] C63086001
 Date of Referral: 04-23-86

Worker ARGIE EARNEST
 Supervisor MARILYN KENNERSON

Please check if all standards were answered Y or NA ☐

I.B. Priority II Reports

1. Did protective services to the child begin within 10 calendar days of the report? Yes ☐ No ☐
3. For sex abuse cases, the Department notified law enforcement orally within 24 hours of the report, and sent a written report within 5 calendar days? Yes ☐ No ☐ N/A ☐

II. The Investigation

Did the worker determine:

- A. The nature, extent, and cause of the abuse/neglect? Yes ☐ No ☐
- B. The identity of the person apparently responsible? Yes ☐ No ☐
- C. The names, ages, and conditions of the other children in the home? Yes ☐ No ☐ N/A ☐
- D. The caretaker's ability to protect the child? Yes ☐ No ☐
- E. The adequacy of the home environment? Yes ☐ No ☐
- F. The relationship of the child to the caretakers? Yes ☐ No ☐
- G. If any action by DHR is needed to protect the child? Yes ☐ No ☐

- III. Did the supervisor approve the worker's actions and findings at the completion of the intake process? Yes ☐ No ☐

IV. Results explained to:

- A. The parents/caretakers Yes ☐ No ☐
- B. Children who were interviewed Yes ☐ No ☐ N/A ☐
- C. The identified complainant Yes ☐ No ☐ N/A ☐

☐ Rate the overall quality of the casework on this case using the quality rating scale. A rating of 1 or 5 requires written justification below:

Supervisor's Signature _____

Date Reviewed _____

Please submit to MIS
 within 3 days of review.

Intake Reading Guide (2B)
 [REDACTED] C72738501
 Date of Referral: 04-23-86

Worker RICHARD BURNETT
 Supervisor VICKIE ROGERS

Please check if all standards were answered Y or NA ☐

I.B. Priority II Reports

1. Did protective services to the child begin within 10 calendar days of the report? Yes ☐ No ☐
4. For non-sex abuse Priority II reports, the Department notified law enforcement either orally or in writing within 3 calendar days of the report? Yes ☐ No ☐ N/A ☐

II. The Investigation

Did the worker determine:

- A. The nature, extent, and cause of the abuse/neglect? Yes ☐ No ☐
- B. The identity of the person apparently responsible? Yes ☐ No ☐
- C. The names, ages, and conditions of the other children in the home? Yes ☐ No ☐ N/A ☐
- D. The caretaker's ability to protect the child? Yes ☐ No ☐
- E. The adequacy of the home environment? Yes ☐ No ☐
- F. The relationship of the child to the caretakers? Yes ☐ No ☐
- G. If any action by DHR is needed to protect the child? Yes ☐ No ☐

- III. Did the supervisor approve the worker's actions and findings at the completion of the intake process? Yes ☐ No ☐

IV. Results explained to:

- A. The parents/caretakers Yes ☐ No ☐
- B. Children who were interviewed Yes ☐ No ☐ N/A ☐
- C. The identified complainant Yes ☐ No ☐ N/A ☐

☐ Rate the overall quality of the casework on this case using the quality rating scale. A rating of 1 or 5 requires written justification below:

 Supervisor's Signature

 Date Reviewed

Please submit to MIS
 within 3 days of review.

Ongoing and CVS Non-Subcare Reading Guide (001) Worker: HICKERSON-3846
 [REDACTED], [REDACTED] 500792567 Supervisor: MARILYN KENNERSON

Date the decision was made to provide on-going services was 01-01-01

7A. Date original Family Service Plan completed _____

- | | | |
|--|------------------------------|-----------------------------|
| 1. Was the original service plan completed within 45 days of the above date? | Yes ☐ | No ☐ |
| 2. Is there a parent's signature indicating that the service plan was jointly developed or an explanation that the parents refused to cooperate? | Yes ☐ | No ☐ |
| 3. Is there an indicator that a copy of the service plan was given/sent to the parent/caretaker? | Yes ☐ | No ☐ |
| 4. Does the service plan identify the family's problems <u>and</u> the effects on family and child? | Yes ☐ | No ☐ |
| 5. Does the service plan identify solutions to the problems <u>and</u> objectives for the family? | Yes ☐ | No ☐ |

B. If a review of the service plan was due during the case-reading period, answer the following (if not go to standard 8). Date review was due of the Original Plan 8 -01.

Date Reviewed: _____

- | | | |
|---|------------------------------|-----------------------------|
| 1. Was it reviewed <u>with the Family</u> every 6 months? | Yes ☐ | No ☐ |
| 2. Was each review approved and signed by supervisor? | Yes ☐ | No ☐ |

8. Monthly Contacts

Did the worker have face-to-face contact with the family and child once a month unless otherwise specified in the service plan? Yes ☐ No ☐

- ☐ Rate the overall quality of the casework on this case using the quality rating scale. A rating of 1 or 5 requires written justification below:

 Supervisor's Signature

 Date Reviewed

Evaluation year is 12/01/85-12/01/86

Please submit to MIS
 within 3 days of review.

LVE Subcare Reading Guide for Cases
Opened Less Than 7 Months
A 504077005 (001)
Placement Date 4-08-85
Type DHP FOSTER HOME

Appendix B-5
Worker BAKER-0847
Supervisor RANNY VOIGHT

NOTE ITEMS 10-14 ARE RESPONSIBILITY
OF UNIT WHICH REMOVES CHILD

10. Was prior or concurrent approval obtained from a supervisor or above before the child was removed? Yes ☐ No ☐
11. Was a permanent plan for the child established before 9/19/85? Date of permanency plan _____ Yes ☐ No ☐ NA ☐

CASE PLAN

12. Is there a written family case plan? Date of plan _____ Yes ☐ No ☐ NA ☐
- 12a. completed within 30 days of placement (check NA if case was opened prior to 10/81) Yes ☐ No ☐ NA ☐
- 12b. identifies the family's problems which caused removal of child Yes ☐ No ☐
- 12c. a description of efforts made to obtain services before removal of child and any services provided to prevent substitute care placement Yes ☐ No ☐
- 12d. identifies changes that must take place before DHR recommends conservatorship Yes ☐ No ☐
- 12e. identifies services to accomplish the change Yes ☐ No ☐
- 12f. identifies the role of the worker, other service providers and parents in achieving changes Yes ☐ No ☐
- 12g. a proposed time limit for achieving the change Yes ☐ No ☐
- 12h. a plan for the parents to visit, telephone, or write to the child Yes ☐ No ☐
- 12i. family's plan for financial support Yes ☐ No ☐
- 12j. special conditions or stipulations of the court order Yes ☐ No ☐ NA ☐
- 12k. consequences if the change is not achieved Yes ☐ No ☐
- 12l. signed by parents Yes ☐ No ☐
14. Was the child's case plan designed to achieve placement:
- a. in the least restrictive setting Yes ☐ No ☐
- b. in close proximity to the parent's home Yes ☐ No ☐
19. Were changes affecting eligibility reported within 5 days of the change? yes ☐ No ☐ NA ☐

- [] Rate the overall quality of the casework on this case using the quality rating scale. A rating of 1 or 5 requires written justification below:

Supervisor's Signature _____

Date Reviewed _____

Evaluation year is 08/09/85-08/08/86

Please submit to MIS
within 3 days after ACR is typed

CVS Subcare Reading Guide for Cases
Opened 7 Months or More
██████████, ██████████ 502352955 (001)
Placement Date: 8-17-84
Type: RELATIVES HOME

Appendix B-6
Worker MEAUX-DE30
Supervisor GAYLE SHAW

NOTE: ITEMS 10-14 ARE RESPONSIBILITY
OF UNIT WHICH REMOVES CHILD

- | | | | | |
|------------------|---|------------------------------|-----------------------------|-----------------------------|
| 10. | Was prior or concurrent approval obtained from a supervisor or above before the child was removed? | Yes ☐ | No ☐ | |
| 11. | Was a permanent plan for the child established before 01/16/83? Date of permanency plan _____ | Yes ☐ | No ☐ | |
| <u>CASE PLAN</u> | | | | |
| 12. | Is there a written family case plan? Date of plan _____ | Yes ☐ | No ☐ | |
| 12a. | completed within 30 days of placement (check NA if case was opened prior to 10/81) | Yes ☐ | No ☐ | NA ☐ |
| 12b. | identifies the family's problems which caused removal of child | Yes ☐ | No ☐ | |
| 12c. | a description of efforts made to obtain services before removal of child and any services provided to prevent substitute care placement | Yes ☐ | No ☐ | |
| 12d. | identifies changes that must take place before DHR recommends conservatorship | Yes ☐ | No ☐ | |
| 12e. | identifies services to accomplish the change | Yes ☐ | No ☐ | |
| 12f. | identifies the role of the worker, other service providers and parents in achieving changes | Yes ☐ | No ☐ | |
| 12g. | a proposed time limit for achieving the change | Yes ☐ | No ☐ | |
| 12h. | a plan for the parents to visit, telephone, or write to the child | Yes ☐ | No ☐ | |
| 12i. | family's plan for financial support | Yes ☐ | No ☐ | |
| 12j. | special conditions or stipulations of the court order | Yes ☐ | No ☐ | NA ☐ |
| 12k. | consequences if the change is not achieved | Yes ☐ | No ☐ | |
| 12l. | signed by parents | Yes ☐ | No ☐ | |
| 13. | Was the family service plan reviewed every 6 months? Parents must be involved in the review unless parents rights terminated. | Yes ☐ | No ☐ | |
| 14. | Was the child's case plan designed to achieve placement: | | | |
| | a. in the least restrictive setting | Yes ☐ | No ☐ | |
| | b. in close proximity to the parent's home | Yes ☐ | No ☐ | |

15. Periodic Reviews

- C. Was a periodic review held before 02/17/83?
When? _____ Yes() No() NA()
- D. Was the next periodic review held within 6 months plus
30 days of the previous periodic review
(before 00/00/00)?
When? _____ Yes() No() NA()
- E. Was periodic review a court review? Yes() No() NA()
16. Was an administrative review held?
When? _____ Yes() No() NA()
If yes, read for following items:
- 16a. description of child's placement and its appropriateness Yes[] No[]
- 16b. continued need for the child's placement. Yes[] No[]
- 16c. extent of compliance with service plan. Yes[] No[]
- 16d. progress towards correcting the problems causing
removal. Yes[] No[]
- 16e. DHR plan for compliance with court orders. Yes[] No[]
- 16f. projected date that permanency plans will be
accomplished. Yes[] No[]
17. Were parents notified that an administrative review
is to be held? Yes[] No[]
18. Dispositional Hearings
Is the child in an adoptive placement, a court specified
permanent foster home, or a relative placement?
If yes, go to #19
- F. Was a dispositional hearing held before 02/17/84?
When? _____ Yes() No() NA()
- G. Was the next dispositional hearing held 6 months plus
30 days from last hearing date (before 00/00/00)?
When? _____ Yes() No() NA()
19. Were changes affecting eligibility reported within
5 days of the change? Yes[] No[] NA[]

[] Rate the overall quality of the casework on this case using the quality
rating scale. A rating of 1 or 5 requires written justification below:

Supervisor's Signature

Date Reviewed

Evaluation year is 06/11/85-06/10/86

Please submit to MIS
within 3 days after ACR is typed

CVS Minimum Standards Reading Guide
 [REDACTED], [REDACTED] 505180460 (001) (L)
 Placement Date 2-11-86
 Type DHR FOSTER HOME

Appendix B-7

Worker HULETT-4803
 Supervisor WILLIAM HEITH, JR.
 Page 1

4100.1 b.	Date of birth	Yes ☐	No ☐	
c.	Place of birth	Yes ☐	No ☐	
d.	Sex	Yes ☐	No ☐	
e.	Religion (if unknown, mark yes)	Yes ☐	No ☐	
f.	Names and addresses of parents and siblings	Yes ☐	No ☐	
g.	Names and addresses of other significant persons	Yes ☐	No ☐	
h.	Date of intake	Yes ☐	No ☐	
i.	Documentation of identity or request (birth certificate)	Yes ☐	No ☐	
j.	Court order regarding conservatorship	Yes ☐	No ☐	
k.	Date of discharge	Yes ☐	No ☐	N/A ☐
4100.1	Foster care intake study (date)	Yes ☐	No ☐	
4200.3 a.	If emergency placement, intake study completed and reviewed by appropriate person within 30 days of placement	Yes ☐	No ☐	N/A ☐
a.1	Conditions making emergency placement necessary	Yes ☐	No ☐	N/A ☐
a.2	Intake study initiated within 5 days if necessary	Yes ☐	No ☐	N/A ☐
a.3	Information about child shared with foster parents or staff of facility when study is complete (initial emergency)	Yes ☐	No ☐	N/A ☐
4100.3 a.	Family circumstances making placement necessary	Yes ☐	No ☐	
b.	Child's developmental medical history	Yes ☐	No ☐	
c.	Parents or M.C.'s expectations regarding placement	Yes ☐	No ☐	
d.	Child's understanding of placement	Yes ☐	No ☐	N/A ☐
e.	Child's personality, behavior and interests	Yes ☐	No ☐	

Child Minimum Standards Reading Guide

Case # 505180460 (001) (L)

Placement Date 2-11-86

Type DHR FOSTER HOME

Worker ROBERTA B. B.
Supervisor WILLIAM KEITH JR
Page 2

f.	Child's school history	Yes ☐	No ☐	N/A ☐
g.	Previous placements	Yes ☐	No ☐	N/A ☐
h.	Child's legal status	Yes ☐	No ☐	
i.	Child's needs	Yes ☐	No ☐	
j.1	Immediate goals	Yes ☐	No ☐	
j.2	Long range goals	Yes ☐	No ☐	
k.	Name of family member or M.C. responsible for the relationship with agency and child	Yes ☐	No ☐	
4100.2	Intake study signed or initialled and dated by qualified person (ref 2200.4)	Yes ☐	No ☐	
4100.4 a.	Intake discussion with child	Yes ☐	No ☐	N/A ☐
b.	Intake discussion with parents or M.C.	Yes ☐	No ☐	

Remarks:

4100.5	Medical exam within 30 days prior to or 30 days after admission (or exempt due to transfer)	Yes ☐	No ☐	
4100.6	Dental exam within one year prior to or arrangement for exam made within 120 days after admission	Yes ☐	No ☐	N/A ☐
4700.6	Report of T.B. test	Yes ☐	No ☐	

Remarks:

CVS Minimum Standards Reading Guide
[REDACTED] 505180460 (001) (L)
Placement Date: 2-11-86
Type DHR FOSTER HOME

Worker: HULETT-4803
Supervisor: WILLIAM KEITH JR
Page: 3

4100.8 PLACEMENT AGREEMENT if applicable Yes ☐ No ☐ N/A ☐
a. Authorization to care for child Yes ☐ No ☐ N/A ☐
b. Medical consent form Yes ☐ No ☐ N/A ☐

Remarks:

4200.1 a. Information regarding child shared with
foster parents or child placing staff
(prior placement if nonemergency) Yes ☐ No ☐ N/A ☐
b. Preplacement visit prior to intake except
emergency or child under 6 months
(nonemergency) Yes ☐ No ☐ N/A ☐
c. Intake Study - foster home study reviewed
by MSW prior to placement (signed/
initialed/dated; non-emergency) Yes ☐ No ☐ N/A ☐

Remarks:

4200.2 AGREEMENT WITH OTHER CPA TO USE THEIR HOME,
if applicable (does not have to be in
child's record) Yes ☐ No ☐ N/A ☐

Remarks:

4300.1 PLAN OF SERVICE within 30 days Yes ☐ No ☐
a. Child's needs and how will be met Yes ☐ No ☐
b. Objectives of placement Yes ☐ No ☐
c. Estimated length of stay Yes ☐ No ☐
d. Shared with foster parents or child Yes ☐ No ☐
e. Input from child Yes ☐ No ☐

Remarks:

CVS Minimum Standards Reading Guide
[REDACTED] 505180460 (001) (L)
Placement Date: 2-11-86
Type: DHR FOSTER HOME

Worker: HULETT-4803
Supervisor: WILLIAM KEITH, JR.
Page: 4

- 4300.2 SIX MONTH REVIEW conference with agency,
foster parents, child, and child's parents
or M.C. Yes ☐ No ☐
- a. Notification of child's parents, or M.C. or
6 month conference Yes ☐ No ☐
- b. Progress toward achieving or changes in
objectives Yes ☐ No ☐
- c. Person, included in review listed Yes ☐ No ☐
- d. Copy of POS to interested parties Yes ☐ No ☐
- Remarks:
-
- 4300.4 Quarterly contact with child Yes ☐ No ☐
- 4300.5 Specialized consultation and treatment
obtained and documented Yes ☐ No ☐ N/A ☐
- Remarks:
-
- 4400.1 (ref. 2200.4)
- a.1 NONEMERGENCY SUBSEQUENT MOVE - approved by
appropriate person prior to placement Yes ☐ No ☐ N/A ☐
- a.2 Preplacement visit prior to subsequent
placement - child over 6 months Yes ☐ No ☐ N/A ☐
- a.3 Move discussed with child Yes ☐ No ☐ N/A ☐
- a.4 Child's understanding and response to move Yes ☐ No ☐ N/A ☐
- 4400.1 b. Plan of service notes changes because of
the move Yes ☐ No ☐ N/A ☐
- c. Child's needs and medical information, etc.
discussed with foster parents prior to
placement Yes ☐ No ☐ N/A ☐

CVS Minimum Standards Reading Guide
██████████ 505180460 (001) (L)
Placement Date: 2-11-86
Type DHR FOSTER HOME

Worker HULETT-4803
Supervisor WILLIAM KEITH, JR
Page 5

4400.2 EMERGENCY SUBSEQUENT MOVE

- | | | | |
|---|------------------------------|-----------------------------|------------------------------|
| a.1 Discussion between staff and child | Yes ☐ | No ☐ | N/A ☐ |
| a.2 Child's understanding and response | Yes ☐ | No ☐ | N/A ☐ |
| b. Plan of service notes changes because of move | Yes ☐ | No ☐ | N/A ☐ |
| c. Child's needs and medical information, etc. discussed with foster parents at time of placement | Yes ☐ | No ☐ | N/A ☐ |
| d. Approved by appropriate supervisor within 10 days (ref. 2200.4) | Yes ☐ | No ☐ | N/A ☐ |

Remarks:

- | | | | |
|---|------------------------------|-----------------------------|------------------------------|
| 4600.1 Limits on restrictions on communications | Yes ☐ | No ☐ | N/A ☐ |
| c. Monthly evaluation of restriction | Yes ☐ | No ☐ | N/A ☐ |
| d. Practical reasons for limitations | Yes ☐ | No ☐ | N/A ☐ |

Remarks:

- | | | | |
|---|------------------------------|-----------------------------|------------------------------|
| 4600.6 Consent for use of pictures and reports from child and parent or M.C. | Yes ☐ | No ☐ | N/A ☐ |
| 4600.7 c. Record of physical punishment and restrictions longer than 24 hours | Yes ☐ | No ☐ | |
| d. Use of physical holding, length of time documented | Yes ☐ | No ☐ | N/A ☐ |

Remarks:

CVS Minimum Standards Reading Guide
[REDACTED] 505180460 (001) (L)
Placement Date: 2-11-86
Type: DHR FOSTER HOME

Worker: HULETT-4973
Supervisor: WILLIAM KEITH, JR
Page: 8

4700.2	Annual medical exam	Yes ☐	No ☐	
4700.3	Annual dental exam (3 years or older)	Yes ☐	No ☐	N/A ☐
4700.5	Immunization records	Yes ☐	No ☐	
4700.7 a.	Record of each visit to physician and dentist and recommended treatment	Yes ☐	No ☐	
b.	Record of medications and treatment (include dosage)	Yes ☐	No ☐	
4900.8	Medical consent form (may be in foster home record)	Yes ☐	No ☐	

Remarks:

4800.1	Discharge conference held	Yes ☐	No ☐	N/A ☐
4800.2	Circumstances around emergency discharge, if applicable	Yes ☐	No ☐	N/A ☐
4800.3	Written authorization of parents or M.C., if applicable	Yes ☐	No ☐	N/A ☐
4800.4 a.	Circumstances around discharge	Yes ☐	No ☐	N/A ☐
b.	Date, name, address, relationship of person to whom child was discharged	Yes ☐	No ☐	N/A ☐

Remarks:

1400.1	Serious incident reported to parent or M.C.	Yes ☐	No ☐	N/A ☐
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CVS Minimum Standards Reading Guide
[REDACTED] 505180460 (001) (L)
Placement Date 2-11-86
Type: DHR FOSTER HOME

Worker HULETT-4802
Supervisor WILLIAM KEITH, JR
Page 7

1400.2 Description of serious incident Yes ☐ No ☐ N/A ☐
a. Date of incident Yes ☐ No ☐ N/A ☐
b. Time Yes ☐ No ☐ N/A ☐
c. Staff/children involved Yes ☐ No ☐ N/A ☐
d. Surrounding circumstances Yes ☐ No ☐ N/A ☐
Remarks:

1400.4 Runaway report to parent or M.C. Yes ☐ No ☐ N/A ☐
Remarks:

3200.2 Reasons for parents decision to place child Yes ☐ No ☐ N/A ☐

Supervisor's Signature

Date Reviewed
Evaluation year is 08/26/85-08/25/86

SUPERVISOR'S QUALITATIVE RATING SCALE

<u>RATING</u>	<u>DESCRIPTORS</u>
1. Unacceptable	(1) Work is of poor quality (2) Work is of inadequate quality to meet basic performance standards (3) Work assignment must be redone or requires the assistance of the supervisor and/or other personnel in order to make it acceptable. (4) Continued work of this quality indicates dismissal of the employee. (5) Written justification of this rating is required.
2. Less than adequate	(1) work is marginal in terms of performance standards. (2) Some rework required on the part of the worker in order to meet basic standards. (3) Excessive supervision needed in order to complete the task. (4) Failure to meet time requirements or deadlines. (5) Omission or partial omission of material or actions needed to meet compliance standards. (6) Remedial action required.
3. Good	(1) Work is adequate; meets expected performance standards. (2) Normal or expected amount of supervision needed in order to complete the task. (3) work is complete; task finished in a timely manner; no omissions or partial omission requiring unusual rework or revision. (4) Continued work of this quality will meet performance expectations and compliance standards. (5) Quality of this work represents what is expected of a worker in this position.

RATING

DESCRIPTORS

4. Very good

- (1) Quality of work is more than adequate and exceeds expected performance standards.
- (2) Less than normal or expected amount of supervision is needed to complete the task.
- (3) Worker turns out above average amount of work.
- (4) Worker's speed and accuracy exceed basic performance standards.
- (5) Continued work of this quality indicates special recognition for the contributions of this employee.

5. Exceptional

- (1) Quality of work is unusually high; to the degree that it can be considered outstanding, extraordinary, or rare.
- (2) Work goes well beyond basic performance standards. Worker needs much less than normal or expected supervision. Work accomplished quickly and efficiently with virtually no errors.
- (3) The worker takes initiative, develops new procedures or techniques which may increase productivity of the entire unit or organization. Other workers seek this person out for advice and instruction.
- (4) Worker shows exceptionally high degree of interest, willingness, and dedication. Extra effort is typical.
- (5) Continued work of this quality indicates this person should be aggressively recruited for promotion to a more responsible position. They show potential for significant long range contributions to the organization.
- (6) Written justification for this rating required.

APPENDIX C

Input Document and Output Reports

Input Documents

1. Form 2202A - Canris Report C-1
2. Form 2000A - SSMS Client Registration C-3
3. Form 2001A - Foster Care, Adoption and Conservatorship Tracking System C-5
4. Intake Log C-7

Output Reports

5. Intake Log C-8
6. Worker's Performance Report - Preliminary C-11
7. Worker's Performance Report - Final C-15
8. Supervisor's Case Reading Tickler C-19
9. Supervisor's Quarterly Aggregate Report C-22
10. Quarterly Service Control/Compliance Report C-24
11. Service Control Compliance Report C-27
12. Formula for Calculating Workload Expectations C-30

Worker Taking Intake Report		Time Reported to DHR ☐ am ☐ pm	
1. CANRIS Incident No.	2. S.O. Use Only	3.	

Form 2202-A/1-84
Texas Department of Human Resources
CHILD PROTECTIVE SERVICES
CANRIS REPORT

SECTION I—WORKER INFORMATION

4. Worker Name—Last	First	5. Emp. No.	6. BJN	7. Mail Code
---------------------	-------	-------------	--------	--------------

SECTION II—INCIDENT REPORT

8. Date Occurred to Child	9. Date Reported to DHR	10. Date Invest. Completed	11. Source	12. PRIORITY a. At Intake b. Actual
				0 0

13. DISPOSITION

1—Adjudicated
2—Reason To Believe
3—Unfounded
4—Family Moved

14. ANNUAL FAMILY INCOME

1—\$0 to \$8,999	4—\$34,000 to \$62,999
2—\$9,000 to \$17,999	5—\$63,000 or more
3—\$18,000 to \$33,999	

TEMPORARY NO.

C 652627

SECTION III—INDIVIDUAL INFORMATION

15. Line	16. Name—Last	First	MI	17. Date of Birth	18. Mar. St.	19. Sex	20. Eth	21. Rel'ship	22. Role	23. SSMS
24. Street Address				25. City		26. St. 27. ZIP		28. Co.		29. Characteristics
30. DHR Client No.		31. Social Security No.		32. Type of Abuse/Neglect			33. Fatal		34. Leg. Act.	35. Prev. Inc. No.
37. Home Telephone No.		38. Work/School Telephone		39. Work/School Address						

15. Line	16. Name—Last	First	MI	17. Date of Birth	18. Mar. St.	19. Sex	20. Eth	21. Rel'ship	22. Role	23. SSMS
24. Street Address				25. City		26. St. 27. ZIP		28. Co.		29. Characteristics
30. DHR Client No.		31. Social Security No.		32. Type of Abuse/Neglect			33. Fatal		34. Leg. Act.	35. Prev. Inc. No.
37. Home Telephone No.		38. Work/School Telephone		39. Work/School Address						

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24. Street Address				25. City		26. St. 27. ZIP		28. Co.		29. Characteristics
30. DHR Client No.		31. Social Security No.		32. Type of Abuse/Neglect			33. Fatal		34. Leg. Act.	35. Prev. Inc. No.
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24. Street Address				25. City		26. St. 27. ZIP		28. Co.		29. Characteristics
30. DHR Client No.		31. Social Security No.		32. Type of Abuse/Neglect			33. Fatal		34. Leg. Act.	35. Prev. Inc. No.
37. Home Telephone No.		38. Work/School Telephone		39. Work/School Address						

15. Line	16. Name—Last	First	MI	17. Date of Birth	18. Mar. St.	19. Sex	20. Eth	21. Rel'ship	22. Role	23. SSMS
24. Street Address				25. City		26. St. 27. ZIP		28. Co.		29. Characteristics
30. DHR Client No.		31. Social Security No.		32. Type of Abuse/Neglect			33. Fatal		34. Leg. Act.	35. Prev. Inc. No.
37. Home Telephone No.		38. Work/School Telephone		39. Work/School Address						

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CANRIS REPORT CODES

Item 11 - Source of Report

ANO - Anonymous
 CCF - Child Care Facility
 DHR - Dept. of Human Resources
 DOC - Doctor
 FRN - Friend
 FVS - Family Violence Shelter
 HOS - Hospital
 LAW - Law
 NEI - Neighbor
 NEW - News Media
 OSA - Other Social Agency
 OTH - Other
 PAR - Parent
 REL - Relative
 SCH - School
 VIC - Victim

Item 12 - Priority

1 - Priority 01
 2 - Priority 02
 3 - Priority 03
 0 - Not Applicable

Item 18 - Marital Status

MA - Married
 WI - Widowed
 SE - Separated
 DI - Divorced
 SI - Single, never married
 UK - Unknown
 NA - Not applicable, child

Item 19 - Sex

F - Female
 M - Male

Item 20 - Ethnic Group

A - Anglo
 B - Black
 H - Hispanic
 I - American Indian
 O - Oriental
 X - Other

Item 21 - Relationship

CODE ALIAS RELATIONSHIP

OV OVA Orphan Victim
 FA FAA Father
 MO MOA Mother
 SF SFA Stepfather
 SM SMA Stepmother
 PP PPA Parent's Paramour
 AF AFA Precon Adopt Father
 AM AMA Precon Adopt Mother
 FF FFA Foster Father
 FM FMA Foster Mother
 GF GFA Grandfather
 GM GMA Grandmother
 BR BRA Brother
 SI SIA Sister
 SB SBA Stepbrother
 SS SSA Stepsister
 AU AUA Aunt
 UC UCA Uncle
 CO COA Cousin
 OT OTA Other Relative
 SC SCA School Personnel
 DC DCA Day Care Personnel
 IN INA Institutional Personnel
 NO NOA None of the Above
 UK UKA Unknown

Item 22 - Role

VC - Alleged Victim
 AP - Alleged Perpetrator
 UK - Unknown
 NO - Not Involved

Item 23 - SSMS

OP - Open
 OC - Open/Close
 NO - Do not register

Item 29 - Characteristics

AG - Aged
 BD - Blind
 DF - Deaf
 PH - Physically Handicapped
 MR - Mentally Retarded
 ED - Emotionally Disturbed
 RF - Refugee
 MG - Migrant
 EN - Entrant
 NO - None

Item 31 - Type of Abuse/Neglect

ABAN - Abandonment
 BONE - Bone Fracture
 BRAI - Brain Damage
 BRUI - Bruises
 BURN - Burns
 CONC - Concussion
 CONF - Confinement
 DISL - Dislocation
 DISM - Dismemberment
 EDUC - Educational Neglect
 EMOT - Emotional Abuse
 EXPL - Exploitation
 EXPO - Exposure
 HEMA - Hematoma Subdural
 HEMR - Hemorrhage Subdural
 INTL - Internal Injuries
 MALN - Malnutrition
 MEDI - Medical Neglect
 PHYS - Physical Neglect
 POIS - Poisoning
 PORN - Pornography
 PROS - Prostitution
 SCAL - Scalding
 SENS - Sensory Damage
 SEXL - Sexual Abuse
 SKUL - Skull Fracture
 SPRA - Sprains
 SUFF - Suffocation
 SUPE - Lack of Supervision
 WELT - Welts
 WOUN - Wounds
 NA - Not Applicable

Item 33 - Fatal

NF - Not Fatal
 FA - Death because of Abuse/Neglect
 FO - Fatal-Other
 NA - Not Applicable

Item 34 - Legal Action

	CODE	ACTION
Victim/ Child	PNF	Petition Not Filed
	PET	Petition Filed
	DHR	DHR Appointed Conservator
	OTH	Other Conservator Appointed
	CNA	Conservator Not Appointed
Alleged Perpetrator	NCF	No Criminal Charges Filed
	CCF	Criminal Charges Filed
	CCD	Criminal Charges Dropped
	PRC	Perpetrator Convicted
	APA	Alleged Perpetrator Acquitted
Other Individual	NA	Not Applicable

REASON FOR CLOSURE CODES (Item 29)

Choose a program-specific code, if applicable, from groups I, II, or III. If none are applicable, choose a generic code from group IV.

I. FAMILY SUPPORT SERVICES CODES

- 01 - Services provided—no other services needed
 - 02 - Client employed full time for 30 days or longer - services no longer needed*
 - 03 - Client employed part-time for 30 days or longer- services no longer needed
 - 04 - Client refused to cooperate
 - 05 - Child Day Care parent is no longer participating in employment, training, or job search
 - 06 - Child Day Care Services not available
 - 07 - EPSDT services arranged/provided
 - 50 - Client employed - self placement
 - 51 - TEC job placement without DHR assistance
- *Client employed full-time for 90 days for employment initiative provider agreement.

II. AGED AND DISABLED SERVICES CODES

- 08 - Client denied due to income over the income limit up to \$620.00
- 09 - Client denied due to income - \$621.00 - \$700.00
- 10 - Client denied due to income - \$701.00 - \$800.00
- 11 - Client denied due to income - \$801.00 - \$1000.00
- 12 - Client denied due to income - \$1001.00 +
- 13 - Client denied due to resources over the limit \$5,001.00 - \$6,000.00
- 14 - Client denied due to resources - \$6,001.00 - \$7,000.00
- 15 - Client denied due to resources - \$7,001.00 - \$8,000.00
- 16 - Client denied due to resources - \$8,001.00 - \$10,000.00
- 17 - Client denied due to resources - \$10,001.00 - \$20,000.00
- 18 - Client denied due to resources - \$20,001.00+
- 19 - Client denied due to transfer of resources
- 20 - Client denied due to failure to provide information
- 21 - Client's functioning improved—services no longer needed
- 22 - Client's functioning deteriorated—moved to ICF facility, nursing home, or skilled facility
- 23 - Client ineligible due to lack of functional or medical need

III. CHILD PROTECTIVE SERVICES CODES

A. Only for client types of Court-ordered Social Study or Out-of-Town Inquiry (OTI)

- 31 - Service completed—no further child protective services needed
- 32 - Order/Request withdrawn—no further child protective services needed

B. For all other Protective Services Client Types

- 33 - Family placed child with others—no further DHR services needed
- 34 - Child returned home, parental/relative functioning improved — no further DHR services needed
- 35 - Child returned home, problems in parental/relative functioning continue but further DHR services not appropriate
- 36 - Juvenile placed in TYC or detention facility—no further DHR services needed
- 37 - Child emancipated or services discontinued to child 18-21
- 38 - Services discontinued to family member because of termination of parental rights or because the family cannot be located after a diligent search (child must be placed with or by DHR)
- 39 - The court has ordered DHR to terminate services
- 40 - Post-consummation services ended — no further DHR services needed

C. If none of the above specific reasons apply in Child Protective Services, select one of the following reasons, if appropriate.

- 41 - Parental/individual functioning has improved — no further DHR services needed
- 42 - Problem in parental/individual functioning continues, but DHR services are not appropriate

IV. GENERIC CODES

For all programs: If none of the above program-specific reasons apply, select one of the following generic codes:

- 69 - Client already open to another worker/contract provide
- 70 - Priority group has been cut
- 71 - Funds for purchased services not available
- 72 - Client no longer eligible
- 73 - DHR staff resources not available
- 74 - Community resources not available
- 75 - Client died
- 76 - Client moved/unable to locate
- 77 - Client withdrew/dissatisfaction or refusal of services
- 78 - Client refused to pay fees

FC

5

1

Appendix C-3

Texas Department of Human Resources

FOSTER CARE, ADOPTION AND CONSERVATORSHIP
TRACKING SYSTEM (FACTS)

WORKER INFORMATION

1. Worker Name (Last)	First
2. Employer ID	3. BJA ID
4. Mail Code	5. Today's Date
6. Worker Responsibilities (Check all that apply)	
☐ 1. Primary Responsibility	☐ 2. Courtesy Supervision

CLIENT INFORMATION

Temporary No.

7. Client No. 31	OR T00445364	8. Action Code 41	9. Effective Date 43
☐ 1. Initiate Tracking	☐ 2. Update	☐ 3. Terminate Tracking	☐ 4. Close
10. Client Name (Last) 30	(First) 45	(MI) 75	11. Social Security No.
12. Date of Birth 47			
13. Ethnic Group 34	14. Sex 36		
☐ 1. Anglo ☐ 2. Black ☐ 3. Hispanic ☐ 4. American Indian ☐ 5. Oriental ☐ 6. Other	☐ 1. Female ☐ 2. Male		
15. CLIENT CHARACTERISTICS - Check all that apply (enter an * to delete a characteristic)			
☐ 02 - Blind	☐ 05 - Mentally Retarded	☐ 08 - Refugee	☐ 11 - Entrant
☐ 03 - Deaf	☐ 06 - Emotionally Disturbed	☐ 09 - Migrant	
☐ 04 - Physically Handicapped	☐ 07 - Sibling Group	☐ 10 - None	
			15.a. Certification Worker BJA

16. Family Identifier Name (enter last name first) 19	17. Family ID Client No. (must be registered on SSMS) 38
---	--

18. CLIENT TYPE		19. ELIGIBILITY STATUS		20. Certification/Eligibility Date		22. Priority	
☐ 31 - Abuse/Neglect	☐ 37 - Non-adjudicated CHINS	☐ 01 - SSI	☐ 09 - MAO Foster Care	☐ 34		☐ 0	
☐ 32 - Abuse	☐ 38 - Adj. Delinquent-Court Ordered	☐ 02 - AFDC Recd	☐ 10 - State Paid Foster Care	☐ 20.a. Denial Date		☐ 21. Review Date	
☐ 33 - Neglect	☐ 42 - Protective Placement (Non-Abuse/Neglect)	☐ 03 - MAO/IE	☐ 11 - AFDC/MAO/SP FC Application Pending	☐ 20.b. Denial Date		☐ 21. Review Date	
☐ 34 - Truant	☐ 43 - Interstate Compact for Placement of Children	☐ 04 - Inc. Elig.	☐ 14 - Cal. S R/E	☐ 20.c. Denial Date		☐ 21. Review Date	
☐ 35 - Runaway		☐ 05 - Without Regard		☐ 20.d. Denial Date		☐ 21. Review Date	
☐ 36 - Adj. CHINS - Court Ordered		☐ 06 - AFDC Foster Care		☐ 20.e. Denial Date		☐ 21. Review Date	

23. STATUS—Initiate/Update		24. Legal Status Date 25. County		26. PERMANENCY PLAN		27. ARE/OTHER EXCHANGE	
☐ 01 - Men. Conservatorship/Parental Rts. Not Term.	☐ 06 - Adoption Consummated	☐ 01 - SSI	☐ 09 - MAO Foster Care	☐ 01 - Return Home/Dismiss Conserv.	☐ 06 - Emancipation	☐ 1-NA	
☐ 02 - Men. Conservatorship/Parental Rts. Term.	☐ 07 - Child Emancipated	☐ 02 - AFDC Recd	☐ 10 - State Paid Foster Care	☐ 02 - Adoption	☐ 07 - Other	☐ 2-ARE	
☐ 03 - Voluntary Relinquishment	☐ 08 - Child Died	☐ 03 - MAO/IE	☐ 11 - AFDC/MAO/SP FC Application Pending	☐ 03 - Permanent Foster Care	☐ 08 - Pending	☐ 3-ARE & Other Exchange	
☐ 04 - Voluntary Placement Agreement	☐ 09 - DHR Resp. Terminated	☐ 04 - Inc. Elig.	☐ 14 - Cal. S R/E	☐ 04 - Transfer Cons. to Other		☐ 4-No	
☐ 05 - Other Legal Basis for DHR Responsibility		☐ 05 - Without Regard		☐ 05 - Permanent Custodial Care			

28. Line 29. Date Placed 30. Liv. Arr. 31. How Prov. 32. Facility No. 33. Residence Name							
34. Residence Street Address 41	35. City 43	36. St. 37. ZIP 38	39. County 103				
28. Line 29. Date Placed 30. Liv. Arr. 31. How Prov. 32. Facility No. 33. Residence Name							
34. Residence Street Address 41	35. City 43	36. St. 37. ZIP 38	39. County 103				
28. Line 29. Date Placed 30. Liv. Arr. 31. How Prov. 32. Facility No. 33. Residence Name							
34. Residence Street Address 41	35. City 43	36. St. 37. ZIP 38	39. County 103				

39. CORRECT/TRANSFER TO THIS BJA				40. FOR S.O. USE			
41. NAME—LAST	42. FIRST	43. STREET	44. CITY	45. TX	46. ZIP		

Form 2001-A/2-83

C-5

61

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BEST COPY AVAILABLE

**FOSTER CARE, ADOPTION AND CONSERVATORSHIP
TRACKING SYSTEM (FACTS)
Items 30 and 31 - Corresponding Codes**

ITEM 30 - LIVING ARRANGEMENT	ITEM 31 - HOW PROVIDED
01 - Own Home 02 - Relative's Home 03 - Independent Living Arrangement 31 - Unauthorized Absence 32 - Other	01 - Not Applicable
04 - Adoptive Home 33 - Adoptive Home/Former Foster Home	02 - Adoption Subsidy 03 - Purchased Adoption 04 - Purchased/Subsidized Adoption 05 - Free 06 - Client Pays 07 - County Paid Foster Care 08 - AFDC Foster Care 09 - MAO Foster Care 10 - State Paid Foster Care 13 - Other Pays
34 - Adoptive Home/Relative Home	02 - Adoption Subsidy 03 - Purchased Adoption 04 - Purchased/Subsidized Adoption 05 - Free 06 - Client Pays 13 - Other Pays
05 - DHR Foster Home 06 - Other Foster Home 35 - Permanent Foster Home (Permanent foster care agreement signed) 07 - DHR Foster Group Home 08 - Other Foster Group Home 09 - Emergency Shelter Foster Home 10 - Emergency Shelter Foster Group Home 11 - Foster Home for Emotionally Disturbed 12 - Foster Group Home for Emotionally Disturbed 13 - Foster Home for Mentally Retarded 14 - Foster Group Home for Mentally Retarded 15 - Emergency Shelter Institution	05 - Free 06 - Client Pays 07 - County Paid Foster Care 08 - AFDC Foster Care 09 - MAO Foster Care 10 - State Paid Foster Care 12 - CWF Group Home or Emergency Shelter 13 - Other Pays

ITEM 30 - LIVING ARRANGEMENT	ITEM 31 - HOW PROVIDED
17 - Private Child Caring Institution 19 - Private Institution for Mentally Retarded 21 - Private Institution for Emotionally Disturbed 22 - Public/Private for Physically Handicapped 23 - Public/Private for Blind/Deaf 27 - Maternity Home 28 - Halfway House 29 - Hospital 36 - Therapeutic Camp	05 - Free 06 - Client Pays 07 - County Paid Foster Care 08 - AFDC Foster Care 09 - MAO Foster Care 10 - State Paid Foster Care 13 - Other Pays
16 - Public Child Caring Institution 18 - Public Institution for Mentally Retarded 20 - Public Institution for Emotionally Disturbed	05 - Free 06 - Client Pays 07 - County Paid Foster Care 13 - Other Pays
24 - Texas Youth Council Facility 25 - Other Juvenile Detention Facility 26 - Jails and Prisons	05 - Free 13 - Other Pays
30 - Nursing Home	06 - Client Pays 13 - Other Pays

The following items must be completed for your document to process. Check other items also to be sure you have updated all necessary items

ACTION CODE	Form 2001-A		Form 2001-B	
	PRIMARY WORKER	COURTESY WORKER	PRIMARY WORKER	COURTESY WORKER
INITIATE TRACKING	All items must be completed. Legal status must be 01-05.	Items 1-12 must be completed.	All client related items that are not pre-printed must be completed. Legal status must be 01-05.	Items 5, 6, 8, and 9 must be completed.
UPDATE TRACKING	All items must be completed.	Items 1-12 and 39 (if a BJN transfer is necessary) must be completed.	Items 5, 8, 9 and any items that need to be added or updated must be completed.	Items 5, 8, 9, and 39 (if a BJN transfer is necessary) must be completed.
TERMINATE TRACKING	All items must be completed. Legal status must be 06-09 and legal status date must be updated.	Do not use this action code.	Items 5, 8, 9, and any items that need to be added or updated must be completed. Legal status must be 06-09 and legal status date must be updated.	Do not use this action code.
CLOSE TRACKING	All items must be completed. Legal status must be 06-09 and legal status date must be updated.	Items 1-12 must be completed.	Items 5, 8, 9 and any items that need to be added or updated must be completed. Legal status must be 06-09 and legal status date must be updated.	Items 5, 8, and 9 must be completed.

Appendix C-4

Date _____

General instructions:

Type A/N - Enter type of abuse/neglect, whether sexual abuse or non-sexual abuse or I & R.

If case is I & R or Priority 3 and will not be assigned to a worker for investigation, enter I & R in this space.

<u>CANRIS #</u>	<u>Case Name</u>	<u>Date Reported To DHR</u>	<u>Priority at Intake</u>	<u>Type (SA, A, N, A/N, I&R)</u>	<u>Worker Assigned</u>	<u>EIN</u>
(C# from 2202)	(From 2202-Line 1)	(As on 2202)				

This image shows a full page of blank graph paper. The grid consists of horizontal and vertical lines forming small squares. There are approximately 20 columns and 20 rows visible on the page. The lines are thin and black, set against a white background.

Intake Log

The computer generated Intake Log consists of a listing of all intakes (Priority I, II, and III), Priority III intakes not investigated, I&R's (Information and Referrals), and IIP's (Intakes In Progress) for individual units. The intakes are listed with the temporary "C" number from the CANRIS form (2202A). I&R's are assigned consecutive numbers from a numbering machine. Other information listed on the Intake Log is the name, date of intake, priority, type of intake, and worker assigned to the intake.

As a finalized CANRIS is entered into the computer, the intake is updated on the Intake Log with an asterisk to the left of the intake to indicate to the supervisor that the CANRIS has been done. After the Intake Reading Guide has been entered into the computer, the asterisk is replaced by a plus sign. Thereby the supervisor is aware of the intakes for which the investigations have not been completed, intakes that have been CANRISed, and intakes that have been read for standards.

The Intake Log is generated at midmonth and at the end of the month. This report is sent to the supervisors with copies to the Program Directors and Regional Director.

After the end-of-the-month report is generated, a purge is done of the data in the Intake Log. All Priority I and II intakes that have been read, all Priority III intakes that have been CANRISed, Priority III intakes that were not to be investigated, I&R's, and IIP's are purged from the Intake Log. These totals are stored in the computer by unit and by region to be used at a later date for statistical purposes.

08-15-86

I n t a k e L o g

Unit # 17

Temporary#	Case Name	Reported to DHR	Pri	Type	Worker	EIN
*C85928101	[REDACTED]	07-22-86	2	N	YOUNG, SUSAN	5004
C85928401	[REDACTED]	07-22-86	2	A	CARR, BELINDA	2609
*C85923901	[REDACTED]	07-23-86	1	A	SPELL, RONALD	9057
*C85928501	[REDACTED]	07-23-86	1	A	HARRIS, GAIL	C704
*C87725801	[REDACTED]	07-23-86	2	N	YOUNG, SUSAN	5004
C87725901	[REDACTED]	07-23-86	1	N	CARR, BELINDA	2609
C87726001	[REDACTED]	07-24-86	2	N	HARRIS, GAIL	C704
C87726101	[REDACTED]	07-24-86	2	A/N	CARR, BELINDA	2609
C87726201	[REDACTED]	07-24-86	2	SA	HARRIS, GAIL	C704
C85929001	[REDACTED]	07-25-86	2	N	CAPPI, JUDITH	B135
+C85932601	[REDACTED]	07-25-86	2	N	NGUYEN, DINH	D951
*C85959501	[REDACTED]	07-25-86	2	N	NGUYEN, DINH	D951
*C79706501	[REDACTED]	07-28-86	2	N	YOUNG, SUSAN	5004
*C85932001	[REDACTED]	07-28-86	1	SA	HARRIS, GAIL	C704
C85932501	[REDACTED]	07-28-86	2	A/N	CARR, BELINDA	2609
C87726901	[REDACTED]	07-28-86	2	A	CAPPI, JUDITH	B135
C87727001	[REDACTED]	07-28-86	2	N	YOUNG, SUSAN	5004
*C87727201	[REDACTED]	07-29-86	2	A	CAPPI, JUDITH	B135
C87727301	[REDACTED]	07-29-86	3	A	HARRIS, GAIL	C704
C87727501	[REDACTED]	07-29-86	2	N	CARR, BELINDA	2609
C87727701	[REDACTED]	07-29-86	2	N	CAPPI, JUDITH	B135
C87727901	[REDACTED]	07-30-86	2	N	SPELL, RONALD	9057
*C87728001	[REDACTED]	07-30-86	2	N	NGUYEN, DINH	D951
C87728101	[REDACTED]	07-30-86	2	N	HARRIS, GAIL	C704
C85940501	[REDACTED]	07-31-86	2	N	NGUYEN, DINH	D951
C87728301	[REDACTED]	07-31-86	2	N	YOUNG, SUSAN	5004
000004662	[REDACTED]	08-01-86		I&R		
C87716401	[REDACTED]	08-01-86	1	N	YOUNG, SUSAN	5004
C87728401	[REDACTED]	08-01-86	2	N	CARR, BELINDA	2609
C87728501	[REDACTED]	08-01-86	2	N	STEPHENSON, LOYCE	4381
C87728701	[REDACTED]	08-01-86	3	A	HARRIS, GAIL	C704
C87728801	[REDACTED]	08-01-86	2	A	YOUNG, SUSAN	5004
C87728901	[REDACTED]	08-01-86	2	SA	CAPPI, JUDITH	B135
C87729201	[REDACTED]	08-01-86	2	A	NGUYEN, DINH	D951
C87729301	[REDACTED]	08-01-86	1	SA	CAPPI, JUDITH	B135
C87729401	[REDACTED]	08-01-86	2	N	STEPHENSON, LOYCE	4381
C85940901	[REDACTED]	08-02-86	3	N	IIP	
C85941001	[REDACTED]	08-02-86	2	A	IIP	
C85941401	[REDACTED]	08-04-86	3	N	YOUNG, SUSAN	5004
C85941501	[REDACTED]	08-04-86	2	A	STEPHENSON, LOYCE	4381
C87729501	[REDACTED]	08-04-86	2	N	CARR, BELINDA	2609
C87729701	[REDACTED]	08-05-86	2	N	HARRIS, GAIL	C704
C87729801	[REDACTED]	08-05-86	2	A	YOUNG, SUSAN	5004
C87729901	[REDACTED]	08-06-86	1	N	CARR, BELINDA	2609
C87730001	[REDACTED]	08-06-86	2	N	HARRIS, GAIL	C704
C87730101	[REDACTED]	08-06-86	2	A/N	CAPPI, JUDITH	B135
C87730201	[REDACTED]	08-07-86	2	N	YOUNG, SUSAN	5004
C87730301	[REDACTED]	08-07-86	1	N	IIP	
C87716201	[REDACTED]	08-08-86	1	N	IIP	
C87716301	[REDACTED]	08-08-86	3	N	CAPPI, JUDITH	B135

08-15-86

I n t a k e L o g

Unit # 17

Temporary#	Case Name	Reported to DHR	Pri	Type	Worker	EIN
C87730401	[REDACTED], [REDACTED]	08-08-86	2	A	STEPHENSON, LOYCE	4381
C87716501	[REDACTED]	08-09-86	1	N	CARR, BELINDA	2609
C87716601	[REDACTED]	08-10-86	2	A/N	HARRIS, GAIL	C704
000004707	[REDACTED]	08-11-86		I&R		
C87716801	[REDACTED]	08-11-86	1	N	CARR, BELINDA	2609
C87717001	[REDACTED]	08-11-86	2	N	CARR, BELINDA	2609
C87717601	[REDACTED]	08-11-86	2	N	HARRIS, GAIL	C704
000004732	[REDACTED]	08-12-86		I&R		
C85941701	[REDACTED]	08-12-86	2	A/N	CAPPI, JUDITH	8135
C87717501	[REDACTED]	08-12-86	2	A	YOUNG, SUSAN	5004
C87717901	[REDACTED]	08-12-86	2	N	STEPHENSON, LOYCE	4381
C87718101	[REDACTED]	08-13-86	2	N	HARRIS, GAIL	C704
C87718201	[REDACTED]	08-13-86	2	A	IIP	

Summary	Total	SA	A	N	A/N	I&R	P1	P2	P3	IIP
	113	11	30	60	9	3	26	76	8	5

* -CANRIS finalized; Reading Guide not returned.

+ -CANRIS finalized; Reading Guide returned.

CPS Specialist's Performance Report - Preliminary

This report is a listing of the data from all reading guides that have been entered for each worker during the period of time for which the report is run. The report lists the case name and number, type of case, any non-compliances which reflect how the standards relate to the Performance Evaluation (4040) and the supervisor's quality rating. There is also a column to be used to indicate whether the CPS specialist requests an exception (non-compliance which is beyond the worker's control) and the reason for this request.

The preliminary report is generated at the end of the month and is sent to the CPS specialist and supervisor by the fifth working day of the next month, with copies to the Program Director and Regional Director. After receiving the preliminary report, the specialist and supervisor discuss cases where the worker was out of compliance and they feel the non compliance was due to circumstances beyond their control. If they agree that there are exceptions to the non compliances, they indicate this on the report. The supervisor sends the report to the Program Director asking him for approval of the requested exceptions. The Program Director will determine whether or not to allow the worker not to be faulted for the non compliance. The Program Director completes his part of the preliminary report and sends the report to the MIS by the 25th of the month for entry of the exceptions.

Run Date: 08/19/86
 BPR600

Texas Department of Human Services - Nacogdoches, Texas
 Worker's Performance Report - Preliminary
 Reflecting 05/01/86-07/31/86

To: Caseworker
 Supervisor

Worker Name: MELANIE CLEVELAND
 EIN: 3397
 Unit: 13

Case Name Case Number	Type Case	Compliance (Yes/No-Detail)	Performance Indicators	Supv. Rating	Do You Request a Compliance Exception Why? (Y or N)
██████████ C68460201	Intake-Prio 1	Yes	Each standard is in compliance	4	
██████████ C68455401	Intake-Prio 1	Yes	Each standard is in compliance	3	
██████████ C68464001	Intake-Prio 1	Yes	Each standard is in compliance	3	
██████████ C68462801	Intake-Prio 1	Yes	Each standard is in compliance	3	
██████████ C68463201	Intake-Prio 1	No: IA3) Oral and written notification of law; Non-Comp(SSHB 2210)	A - Assessment F - Narr/Forms	3	
██████████ C68410301	Intake-Prio 2 (NSA)	Yes	Each standard is in compliance	4	
██████████ C68459501	Intake-Prio 2 (NSA)	Yes	Each standard is in compliance	3	
██████████ C68449801	Intake-Prio 2 (NSA)	No: IB4) Non-sex abuse-oral/written notif of law non-compliance (SSHB 2220)	A - Assessment F - Narr/Forms	3	
██████████ C68455101	Intake-Prio 2 (NSA)	Yes	Each standard is in compliance	3	
502434822,000,001	Ongoing	Yes	Each standard is in compliance	3	
248741301,000,001	Ongoing	Yes	Each standard is in compliance	3	
506124850,000,001	Ongoing	Yes	Each standard is in compliance	3	
506124850,000,002	Ongoing	Yes	Each standard is in compliance	3	

Run Date: 08/19/86
 BPR600

Texas Department of Human Services - Nacogdoches, Texas
 Worker's Performance Report - Preliminary
 Reflecting 05/01/86-07/31/86

To: Caseworker
 Supervisor

Worker Name: MELANIE CLEVELAND
 EIN: 3397
 Unit: 13

Case Name Case Number	Type Case	Compliance (Yes/No-Detail)	Performance Indicators	Supv. Rating	Do You Request a Compliance Exception (Y or N)	Why?
██████████, ██████████ 231061301,001,001	Ongoing	Yes	Each standard is in compliance	3		
██████████, ██████████ 504119525,001,002	Ongoing	No: 8 Monthly contact Non-compliance	B - Interviewing E - P.O.S. Develop. F - Narr/Forms	3		
██████████, ██████████ 241332202,001,001	Ongoing	Yes	Each standard is in compliance	3		
██████████, ██████████ 506241604,001,001	Ongoing	No: 7A2 Fam POS - Joint Development Non-compliance (SSHB 3310) 7A3 Fam POS - No copy to parents/ caretaker (SSHB 3310) 8 Monthly contact Non-compliance	B - Interviewing E - P.O.S. Develop. F - Narr/Forms B - Interviewing E - P.O.S. Develop. F - Narr/Forms B - Interviewing E - P.O.S. Develop. F - Narr/Forms	3		
██████████, ██████████ 503253935,001,002	Ongoing	Yes	Each standard is in compliance	3		
██████████, ██████████ 506454845,000,001	CVS-Subcare	Yes	Each standard is in compliance	3		
██████████, ██████████ 240574101,001,001	CVS-Subcare	Yes	Each standard is in compliance	3		
██████████, ██████████ 503484449,001,001	CVS-Subcare	Yes	Each standard is in compliance	3		
██████████, ██████████ 504382122,000,001	CVS-Subcare Min. Standard	Yes	Each standard is in compliance			

Run Date: 08/19/86
BPR600

Texas Department of Human Services - Nacogdoches, Texas
Worker's Performance Report - Preliminary
Reflecting 05/01/86-07/31/86

To: Caseworker
Supervisor

Worker Name: MELANIE CLEVELAND
EIN: 3397

For P.D. only: List Compliance Exceptions and Code Reason if Granted.
Submit to MIS by 18th of month.

<u>Case Name/Number/RG#</u>	<u>Standard/Requirement</u>	<u>Granted</u> Y/N	<u>If Granted</u> Reason
-----------------------------	-----------------------------	-----------------------	-----------------------------

Codes:

- 1 - Illness
- 2 - Unit Vacancies
- 3 - Excessive Time-
Consuming Case(s)
- 4 - Authorized Leave
Caseload Mix Problem
- 5A- Intake Overload
- 5B- Ongoing Overload
- 5C- Subcare Overload
- 6 - Unusual Court Requirements
- 7 - Data Error
- 8 - Other

P.D. Signature

Date

70

CPS Specialist's Performance Report - Final

After the exceptions have been entered into the computer from the preliminary report, the Specialist's Performance Report - Final is generated. The final report has basically the same type of information as the preliminary report; that is, case name and number, type of case, non compliances, performance indicators and supervisors rating. In addition, it indicates a yes or no for the compliance exceptions and the reason the exception was granted.

At the end of the report, there is a compliance percentage summary giving the caseload compliance percentage for the month of the report, caseload compliance percentage for fiscal year to date and caseload percentage for the worker's evaluation year to date. It also details the total number of compliances out of total number of standards for each type of case year to date, a synopsis of all of the problem areas (non compliances) noted for that worker year to date, an average quality rating for the month, average quality rating year to date, and a listing of all of the compliance exceptions granted year to date.

This report is run on the 30th of the month after exceptions have been entered. It is generated to the CPS specialist, supervisor and Program Directors with a copy to the Regional Director.

Run Date: 08/20/86
BPR610

Texas Department of Human Services - Nacogdoches, Texas
Worker's Performance Report - Final
Reflecting 05/01/86 - 07/31/86

To: Caseworker
Supervisor
Program Director

Unit Number: 13
Worker Name: MELANIE CLEVELAND
EIN: 3397

Case Name Case Number	Type Case	Compliance (Yes/No-Details)	Performance Indicators	Supv. Rating	Exception Requested	Granted	Reason Granted
[REDACTED] C68460201	Intake-Prio 1	Yes	Each standard is in compliance	4			
[REDACTED] C68455401	Intake-Prio 1	Yes	Each standard is in compliance	3			
[REDACTED] C68464001	Intake-Prio 1	Yes	Each standard is in compliance	3			
[REDACTED] C68462801	Intake-Prio 1	Yes	Each standard is in compliance	3			
[REDACTED] C68463201	Intake-Prio 1 No:			3			
		IA3) Oral and written notification of law; Non-Comp(SSHB 2210)	A - Assessment F - Narr/Forms		Y	Y	Illness
[REDACTED] C68410301	Intake-Prio 2 (NSA)	Yes	Each standard is in compliance	4			
[REDACTED] C68459501	Intake-Prio 2 (NSA)	Yes	Each standard is in compliance	3			
[REDACTED] C68449801	Intake-Prio 2 No: (NSA)			3			
		IB4) Non-sex abuse-oral/written notif of law non-compliance (SSHB 2220)	A - Assessment F - Narr/Forms		N		
[REDACTED] C68455101	Intake-Prio 2 (NSA)	Yes	Each standard is in compliance	3			
[REDACTED] 502434822,000,001	Ongoing	Yes	Each standard is in compliance	3			
[REDACTED] 248741301,000,001	Ongoing	Yes	Each standard is in compliance	3			
[REDACTED] 506124850,000,001	Ongoing	Yes	Each standard is in compliance	3			
[REDACTED] 506124850,000,002	Ongoing	Yes	Each standard is in compliance	3			
[REDACTED] 245823603,000,001	Ongoing	Yes	Each standard is in compliance	3			
[REDACTED] 506157664,000,001	Ongoing	Yes	Each standard is in compliance	4			

Run Date: 08/20/86
•BPR610•

Texas Department of Human Services - Nacogdoches, Texas
Worker's Performance Report - Final
Reflecting 05/01/86 - 07/31/86

To: Caseworker
Supervisor
Program Director

Unit Number: 13
Worker Name: MELANIE CLEVELAND
EIN: 3397

Case Name Case Number	Type Case	Compliance (Yes/No-Details)	Performance Indicators	Supv. Rating	Exception Requested	Reason Granted
241332202,001,001	Ongoing	Yes	Each standard is in compliance	3		
506241604,001,001	Ongoing	No:		3		
		7A2 Fam POS - Joint Development Non-compliance (SSHB 3310)	B - Interviewing E - P.O.S. Develop. F - Narr/Forms		N	
		7A3 Fam POS - No copy to parents/ caretaker (SSHB 3310)	B - Interviewing E - P.O.S. Develop. F - Narr/Forms		N	
		8 Monthly contact Non-compliance	B - Interviewing E - P.O.S. Develop. F - Narr/Forms		N	
503253935,001,002	Ongoing	Yes	Each standard is in compliance	3		
506454845,000,001	CVS-Subcare	Yes	Each standard is in compliance	3		
504382122,001,001	CVS-Subcare Min. Stand.	Yes	Each standard is in compliance			

Run Date: 08/20/86
•BPR610•

Texas Department of Human Services - Nacogdoches, Texas
Worker's Performance Report - Final
Reflecting 05/01/86 - 07/31/86

To: Caseworker
Supervisor
Program Director

Compliance Percentage Summary Sheet

Caseload Compliance % for July 98%
Caseload Compliance % for Fiscal YTD 97%
Caseload Compliance % for Evaluation YTD 97%

Evaluation Due: August

No. of Standards -- 100% Compliance YTD
Intake - 235 of 243 standards
Ongoing - 160 of 176 standards
CVS-Subcare - 18 of 18 standards
Min. Stds. - 445 of 445 standards

Compliance Exceptions Granted YTD
1 Illness

Problem Areas Noted YTD
IA1) Supv. not informed
IA3) Oral and written n
IIA) Nature/extent/caus
IIB) Person responsible
IIC) Other child(ren)'s
IIF) Relationship of ch
7A2 Fam POS - Joint Dev
7A3 Fam POS - No copy t
B1 Fam POS not reviewed
B2 Fam POS not signed b
8 Monthly contact Non-c

Supervisor Average
Rating of Quality/JUL
3.00-Good

Supervisor Average
Rating of Quality/YTD
3.17-Good

Supervisor's Case Reading Tickler

The purpose of this report is to indicate to the supervisors which intakes and cases are to be read any given month. It will also show intakes and cases on which the reading guides are overdue.

Another purpose of this report is to serve as a reminder to the supervisor that initial Ongoing, CVS Subcare, and Minimum Standards Reading Guides have not been completed on new cases.

This report is generated at the end of the month and sent to the supervisors and Program Directors, with copies to the Regional Director and Case Analyst.

This report is automatically updated as the reading guides are received and entered in the computer. The report can be generated at any time during the month by special requests.

BPR500

To: Supervisor
Program Director

Supervisor's Case Reading Tickler - July
07/31/86

Supervisor's Name: AMANDA NEWTON

<u>Case Name</u>	<u>Case Number</u>	<u>Date To Be Read</u>
<u>Intake</u>		
[REDACTED]	C83905701	07/86 *Overdue*
[REDACTED]	C77652901	07/86 *Overdue*
[REDACTED]	C77664501	04/86 *Overdue*
[REDACTED]	C79859201	07/86 *Overdue*
[REDACTED]	C77644701	04/86 *Overdue*
[REDACTED]	C77664601	04/86 *Overdue*
<u>Ongoing</u>		
[REDACTED]	505796137	02/86 *Overdue*
[REDACTED]	504224978	01/86 *Overdue*
[REDACTED]	505682202	02/86 *Overdue*
[REDACTED]	501757147	07/86
<u>Subcare</u>		
[REDACTED]	503876004	03/86 *Overdue*
[REDACTED]	263169307	07/86 *Overdue*
[REDACTED]	501529044	07/86 *Overdue*

INITIAL ONGOING READING GUIDE INFORMATION LIST

Initial Ongoing Reading Guides have not
been received on the following cases.
Due dates are Date Open plus 48 days.

<u>Case Name</u>	<u>Case Number</u>	<u>Date Open</u>
[REDACTED]	505746819	03/11/86
[REDACTED]	505561489	02/03/86
[REDACTED]	506222238	07/25/86
[REDACTED]	259889701	08/07/86
[REDACTED]	501234330	01/07/86
[REDACTED]	506392260	08/13/86
[REDACTED]	505794341	10/28/85
[REDACTED]	500559466	07/25/86
[REDACTED]	281643201	09/09/85
[REDACTED]	506553748	04/24/86
[REDACTED]	506771689	07/31/86

BPRS00

To: Supervisor
Program Director

Supervisor's Case Reading Tickler - July
07/31/86

Supervisor's Name: AMANDA NEWTON

INITIAL CVS SUBCARE READING GUIDE INFORMATION LIST

Initial CVS Subcare Reading Guides have
not been received on the following
cases. Due dates are Date Open plus 33 days.

<u>Case Name</u>	<u>Case Number</u>	<u>Date Open</u>
████████, ██████████	505937525	07/09/86
████████, ██████████	263169306	09/03/84
████████, ██████████	263169305	09/03/84
████████████████████, ██████████	505379627	09/03/84
████████, ██████████	281780007	02/20/86
████████, ██████████	505561491	02/06/86
████████████████████, ██████████	505023793	03/05/86

INITIAL MINIMUM STANDARD READING GUIDE INFORMATION LIST

Initial Minimum Standard Reading Guides
have not been received on the following
cases. Due dates are Date Open plus 33 days.

<u>Case Name</u>	<u>Case Number</u>	<u>Date Open</u>
████████, ██████████	505937525	07/09/86
████████, ██████████	263169306	09/03/84
████████, ██████████	263169307	09/03/84
████████, ██████████	263169305	09/03/84
████████████████████, ██████████	505379627	09/03/84
████████, ██████████	281780007	02/20/86
████████, ██████████	505561491	02/06/86
████████████████████, ██████████	505023793	03/05/86

NOTE: Reading guides must be submitted to MIS within 3 days after case is read.

Supervisor's Quarterly Aggregate Report

This report was designed for the CPS supervisors in Region 10. The report includes a listing of all service control standards by type of case. The report gives a breakdown by each worker in the unit of total non compliances and total cases read for each standard. The information is also totaled for each unit.

This report can be run including exceptions or excluding exceptions.

The report is a quarterly report but can be generated for any period of time. It is sent to the supervisors, Program Directors and Regional Director.

* BPR660 * 09/03/86
Unit : 14
Supervisor: NEWTON

TEXAS DEPARTMENT OF HUMAN SERVICES - WACOGDOCHES, TEXAS
Supervisor's Quarterly Aggregate Report
AMANDA J 05/01/86 - 07/31/86

To: Supervisor
Program Director
Regional Director

TYPE CASE	SERVICE CONTROL STANDARD	(Including Exceptions)										UNIT TOTAL
		Total Non-Compliance / Total Cases Applicable										
		CASHMAN	CORDRAY	JONES	PENN	STRYKER						
Intake2 (NSA)	IB1) Prio 2 time frame	0/ 34	0/ 0	0/ 14	0/ 8	0/ 3						0/ 59
	IB4) Non-sex abuse oral/written	4/ 34	0/ 0	0/ 14	0/ 8	0/ 3						4/ 59
	IIA) Nature/extent/cause not de-	0/ 34	0/ 0	0/ 14	0/ 8	0/ 3						0/ 59
	IIB) Person responsible not iden-	0/ 34	0/ 0	1/ 14	0/ 8	0/ 3						1/ 59
	IIC) Other child(ren)'s names/	0/ 34	0/ 0	0/ 14	0/ 8	1/ 3						1/ 59
	IID) Caretaker ability to protect	1/ 34	0/ 0	0/ 14	1/ 8	0/ 3						2/ 59
	IIE) Adequacy of home env. not	0/ 34	0/ 0	0/ 14	0/ 8	1/ 3						1/ 59
	IIF) Relationship of child to	1/ 34	0/ 0	0/ 14	0/ 8	0/ 3						1/ 59
	IIG) Need for DHR protective	0/ 34	0/ 0	0/ 14	0/ 8	0/ 3						0/ 59
	III) Supv. approval not obtained	0/ 34	0/ 0	0/ 14	0/ 8	0/ 3						0/ 59
	IVA) Results not explained-	0/ 34	0/ 0	1/ 14	0/ 8	0/ 3						1/ 59
	IVB) Results not explained-	0/ 34	0/ 0	0/ 14	3/ 8	0/ 3						3/ 59
	IVC) Results not explained-	0/ 34	0/ 0	1/ 14	2/ 8	0/ 3						3/ 59
Intake2 (NSA)	TOTAL	6/ 34	0/ 0	3/ 14	6/ 8	2/ 3						17/ 59

Quarterly Service Control Compliance Report

This report was designed for the Program Directors. It includes a listing of all service control standards for each type of case. For each standard, it will give the number of cases read for the period of time for which the report is run and the number of cases read fiscal year to date. The report lists by unit the number of cases with non compliances for the period of report and the total compliance percentage for the period of the report. In addition, the report will give the compliance exceptions granted for the period of the report.

The final two columns of the report give the number of cases with non compliances fiscal year to date and the compliance percentage fiscal year to date.

This report will be issued quarterly to the Program Directors with a copy to the Regional Director. This report can be run for any period of time and can be generated on request.

•BPR650•
Run Date: 09/03/86

TEXAS DEPARTMENT OF HUMAN SERVICES - WACOGDOCHES, TEXAS
Quarterly Service Control/Compliance Report
05/01/86 - 07/31/86

TO: Program Directors
Regional Director

Type Case	Service Control Standard	Number Cases Applicable Per/Fiscal YTD	Number Cases Non-Compliance For Period	Compliance Percent For Period	Compliance Exceptions Granted For Period	Number Cases Non-Compliance For Fiscal YTD	Compliance Percent Fiscal YTD
Ongoing	7A1 Orig Fam POS Time	352 / 1012	Unit 13(6) Unit 15(6) Unit 16(1) Unit 18(4) Unit 19(12) Unit 21(8) Total (37)	89 %		Unit 13(11) Unit 14(6) Unit 15(18) Unit 16(11) Unit 18(4) Unit 19(21) Unit 21(14) Total (85)	91 %
	7A2 Fam POS - Joint Development	352 / 1012	Unit 13(20) Unit 15(10) Unit 16(4) Unit 18(7) Unit 19(13) Unit 21(15) Unit 22(11) Total (80)	77 %	Other Unit 18(2) Tot. (2)	Unit 13(40) Unit 14(23) Unit 15(39) Unit 16(28) Unit 17(4) Unit 18(7) Unit 19(40) Unit 21(32) Unit 22(25) Total (238)	76 %
	7A3 Fam POS - No copy to parents/	352 / 1012	Unit 13(24) Unit 15(14) Unit 16(6) Unit 18(12) Unit 19(13) Unit 21(18) Unit 22(1) Total (88)	75 %	Other Unit 15(3) Unit 18(2) Tot. (5)	Unit 13(50) Unit 14(11) Unit 15(37) Unit 16(30) Unit 17(5) Unit 18(14) Unit 19(39) Unit 21(37) Unit 22(2) Total (225)	77 %
	7A4 Fam POS - Problems/effects	352 / 1012	Unit 13(8) Unit 15(3) Unit 18(4) Unit 19(5) Unit 21(7) Total (27)	92 %	Other Unit 18(1) Tot. (1)	Unit 13(17) Unit 14(4) Unit 15(12) Unit 16(7) Unit 18(4) Unit 19(10) Unit 21(15) Total (69)	93 %
	7A5 Fam POS - Solutions/object-	352 / 1012	Unit 13(6) Unit 15(3) Unit 16(1) Unit 18(4) Unit 19(7) Unit 21(7) Total (28)	92 %	Other Unit 18(1) Tot. (1)	Unit 13(13) Unit 14(4) Unit 15(15) Unit 16(9) Unit 17(4) Unit 18(4) Unit 19(13) Unit 21(15) Total (77)	92 %

•BPR650•

Run Date: 09/03/86

TEXAS DEPARTMENT OF HUMAN SERVICES - NACOGDOCHES, TEXAS
Quarterly Service Control/Compliance Report
05/01/86 - 07/31/86

TO: Program Directors
Regional Director

Type Case	Service Control Standard	Number Cases Applicable Per/FiscalyTD	Number Cases Non-Compliance For Period	Compliance Percent For Period	Compliance Exceptions Granted For Period	Number Cases Non-Compliance For Fiscal YTD	Compliance Percent Fiscal YTD
B1 Fam POS not re viewed with		352 / 1012	Unit 13(4) Unit 15(5) Unit 16(2) Unit 18(2) Unit 19(14) Unit 21(13) Unit 22(2) Total (42)	88 X	UCRequire Unit 22(1) Tot. (1) Other Unit 18(1) Tot. (1)	Unit 13(18) Unit 14(12) Unit 15(17) Unit 16(11) Unit 18(2) Unit 19(30) Unit 21(14) Unit 22(3) Total (107)	89 X
B2 Fam POS not si gned by		352 / 1012	Unit 13(3) Unit 15(4) Unit 19(10) Unit 21(15) Total (32)	90 X		Unit 13(18) Unit 14(14) Unit 15(12) Unit 16(9) Unit 17(1) Unit 19(16) Unit 21(18) Total (88)	91 X
B Monthly contact Non-compliance		352 / 1012	Unit 13(14) Unit 15(7) Unit 16(2) Unit 18(3) Unit 19(17) Unit 21(21) Unit 22(2) Total (66)	81 X	UCRequire Unit 22(1) Tot. (1)	Unit 13(39) Unit 14(33) Unit 15(27) Unit 16(27) Unit 17(9) Unit 18(4) Unit 19(55) Unit 21(33) Unit 22(10) Total (237)	76 X
CVS (7 mos	10) No prior/conc urrent approval	58 / 190		100 X			100 X
	11) Perm Plan not established	58 / 190		100 X			100 X
	12) No written fa mily case plan	58 / 190		100 X			100 X
	12a) Fam POS not completed in	58 / 190	Unit 16(4) Total (4)	93 X		Unit 16(5) Total (5)	97 X

Service Control Compliance Report

This report was designed after the State Office Service Control Compliance Report. It contains all the information required by State Office.

Included in this report is a listing of all service control standards. For each standard, the report indicates total cases read, total cases that were not applicable and total cases that were applicable, number of cases that were in compliance and number of cases in non-compliance, and the compliance percentage on cases applicable.

This report can be generated for any period of time; that is, one month, three months, etc., and will be generated on request. Copies will be sent to State Office, Regional Director and Program Directors.

• BPR670 • 09/03/86
Report Reflects ALL units

TEXAS DEPARTMENT OF HUMAN SERVICES - NACOGDOCHES, TEXAS
Service Control Compliance Report
05/01/86 - 07/31/86

To: State Office
Regional Director
Program Director

Type Case	Service Control Standard	Total Cases	Number Cases NA	Number of Cases Applicable	Number of Cases in Compliance	Number of Cases in Non-Compliance	Compliance Percentage Cases Applicable
CVS >=7 mos	10) No prior/conc urrent approval	112	78	34	34	0	100 %
	11) Perm Plan not established	112	78	34	34	0	100 %
	12) No written fa mily case plan	112	78	34	34	0	100 %
	12a) Fam POS not completed in	112	81	31	31	0	100 %
	12b) Fam POS: Pro blems not	112	78	34	34	0	100 %
	12c) Fam POS: Rea sonable	112	78	34	34	0	100 %
	12d) Fam POS: Nec essary changes	112	78	34	31	3	91 %
	12e) Fam POS: Nec essary services	112	78	34	31	3	91 %
	12f) Fam POS: Rol e	112	78	34	31	3	91 %
	12g) Fam POS: Tim e limit for	112	78	34	34	0	100 %
	12h) Fam POS: Pla n for parent	112	78	34	34	0	100 %
	12i) Fam POS: Fin ancial support	112	78	34	34	0	100 %
	12j) Fam POS: Con ditions of court	112	86	26	26	0	100 %
	12k) Fam POS: Con sequences if no	112	78	34	34	0	100 %
	12l) Fam POS: Not signed by	112	78	34	25	9	73 %
	13) Fam POS: Rev iewed every	112	19	93	91	2	97 %
	14a) Placement no t least restric-	112	78	34	34	0	100 %

* BPR670 * 09/03/86
Report Reflects ALL units

TEXAS DEPARTMENT OF HUMAN SERVICES - NACOGDOCHES, TEXAS
Service Control Compliance Report
05/01/86 - 07/31/86

To: State Office
Regional Director
Program Director

Type Case	Service Control Standard	Total Cases	Number Cases NA	Number of Cases Applicable	Number of Cases in Compliance	Number of Cases in Non-Compliance	Compliance Percentag Cases Applicable
	14b) Placement no t close	112	78	34	34	0	100 %
	15) Periodic rev iew time frame	112	25	87	78	9	89 %
	16a) Admin review : no description	112	78	34	34	0	100 %
	16b) Admin review : continued need	112	78	34	34	0	100 %
	16c) Admin review : extent of	112	78	34	34	0	100 %
	16d) Admin review : progress on	112	78	34	34	0	100 %
	16e) Admin review : plan for comp-	112	78	34	34	0	100 %
	16f) Admin review : projected p.	112	78	34	34	0	100 %
	17) Parents not notified of	112	78	34	34	0	100 %
	18) Dispositiona l hearing time	112	102	10	2	8	20 %
	19) Changes re e ligibility not	112	38	74	74	0	100 %

Formula for Calculating Workload Expectations

This report was developed to help the supervisor and specialist determine an appropriate caseload mix and to set reasonable workload expectations, based on the CPS workload standards, for generic caseload.

The report is generated for individual workers for a monthly caseload. The percentages used are variable figures and can be changed, if necessary, when generating the report.

The average quality rating is based on the reading guides that were completed on cases that were worked during the month of the report.

This report can be run as requested.

For Generic Caseloads

09/03/86

For Period 07/01/86-07/31/86

BURNETT	RICHARD	L	% of Case Time	# of Cases	% of Time Used
INTAKE			1.06 X	0 =	.00
INVESTIGATION			7.69 X	0 =	.00
INTAKE/INVESTIGATION			8.34 X	6 =	50.04
IN-HOME			3.34 X	14 =	46.76
CONS./SUB CARE (CHILD)			7.69 X	5 =	38.45
CONS./SUB CARE (FAMILY)			3.34 X	0 =	.00
COURT ORDERED SOCIAL STUDIES			8.33 X	1 =	8.33
OTI			4.00 X	0 =	.00

(% of Time Used)	Total	143.58
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-100.00%

% Overtime/Undertime	43.58	OT
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(Caseload Hrs. Avail.)	X	<u>105.2 hrs.</u>
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Hours Overtime/Undertime	45.84	OT
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Average Quality Rating

	# of RGs	Avg. Rating
INVESTIGATION	11	3.00
IN-HOME	10	3.50
CVS	5	3.00

APPENDIX D

Programming Process

PROGRAMMING SEQUENCE

Coding for the tracking system began with the intake and investigation part of the system. The decision to start at intake was made because it was one of the primary needs of regional staff. The ability to monitor compliance with a multitude of intake standards is extremely important for unit management as well as regional management. The methodology for data collection as well as output reports was completed toward the end of the first year of operation, and coding began on the system during the first project year.

Following intake, the in-home system was brought up, which in and of itself took care of the data collection instrument, the in-home reading guide. Conservatorship and minimum standards were brought up last on the system because they are the most complex part, involving numerous federal/state standards.

Following the building of the data collection mechanisms and files for data storage, the preliminary worker performance report was the first output report which really detailed any levels of compliance with standards. This report involved a significant amount of code due to the compliance exception strategy, which does not fault workers for situations beyond their control.

The next item up on the agenda was the final performance report, which at the worker level reflects only compliance percentages that the worker is accountable for. The preliminary report and the final report constitute the direct delivery component of the tracking system. All additional output reports are in support of the preliminary and final performance report.

Next to be brought up on the system was the supervisor's case reading tickler, which takes all of the tracking of case reading out of the supervisor's hands and places it with the computer. This automation assists line supervisors by telling them one month in advance what they are required to read the following month, allowing them to plan their schedules for case reading around the amount of reading that is required.

The aggregate/quarterly compliance reports indicate regional statistics at the unit and regional levels. One of the compliance reports will take the place of the state office report for service control. It was patterned after the state office report and contains all information required by the state office in addition to data that will assist managers in the region in running the program.

The final report that was written is a workload measure report based on the report that comes out of the PSFC Branch; the PSFC report details workload measures as shown by the statewide time study. A significant addition to the workload measures formula has been made by adding an aggregate quality rating to intake/investigation, in-home services, and conservatorship cases. With this aggregate quality rating the region will be able to determine with

hard data how many cases of each type a worker can handle while maintaining an adequate quality of service.

PROBLEMS WITH PROGRAMMING

Several aspects of programming proved somewhat complex. The most complex aspect involved the granting or denial of compliance exceptions on the worker's final performance report. This process involves temporary file maintenance and updating at the time that the report is batched. This problem was further complicated by the specification that a true accounting at the regional level of all non-compliances had to be maintained at the same time.

Another complex aspect of programming was the several hundred standards that had to be tracked. The large numbers made it burdensome to set up the necessary screens and files to maintain the system.

Another major complication in the programming of the system came from the fact that the consultant was unable to provide as many hours as the region requested in the first part of the second project year. The estimate of hours required was very close, but his inability to program during a critical time set the project behind. The complexity of the system and the program specifications were not the reason for the delay in bringing the system up on time.

INTERACTION WITH THE PROGRAMMER

The primary responsibility for interacting with the consulting programmer on this project was given to the system operator. She had worked very closely with the programmer over a five-year period as other parts of the MIS were brought up. Her knowledge of the computer system coupled with this relationship, was a benefit during the programming effort, which proceeded with very few misunderstandings. To a lesser degree, the project director and the system manager also worked with the programmer on program specifications, and they detailed the mathematics involved in computing compliance percentages.